Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 1 of 70

| Fill in this information to identify your case:                         |   |
|---|---|
| United States Bankruptcy Court for the:  Northern District of: Illinois |   |
| (State)  Case number (if known)   | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pá | art 1: Identify Yourself  |                            |   |
|----|---|----------------------------|---|
|    |   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name  | Lafrance                   | Neva  |
|    | Write the name that is on   | First name                 | First name                                    |
|    | your government-issued picture identification (for                  | Middle name                | Middle name                                   |
|    | example, your driver's  | Reed-Jackson               | Reed-Jackson                                  |
|    | license or passport   | Last name                  | Last name                                     |
|    | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you   |                            | Neva  |
|    | have used in the last   | First name                 | First name                                    |
|    | 8 years   |                            |   |
|    | Include your married or   | Middle name                | Middle name                                   |
|    | maiden names.   | Last name                  | Boyd Last name                                |
|    |   | Last Harrie                | Last Harre                                    |
|    |   | First name                 | First name                                    |
|    |   |                            |   |
|    |   | Middle name                | Middle name                                   |
|    |   | Last name                  | Last name                                     |
| _  |   | Last Hario                 | Last Harie                                    |
| 3. | Only the last 4 digits of your Social                               | XXX - XX                   | XXX - XX0094                                  |
|    | Security number or federal Individual                               | OR                         | OR  |
|    | Taxpayer Identification number (ITIN)                               | 9 xx - xx-                 | 9 xx - xx-                                    |

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 2 of 70

| Debtor 1 Lafrance  | Reed-Jackson   | Case number (if known)   |
|--|--|--|
| First Name   | Middle Name Last Name  |  |
|  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4. Any business names and Employer                           | I have not used any business names or EINs.  | I have not used any business names or EINs.  |
| Identification<br>Numbers (EIN) you<br>have used in the last | Business name  | Business name  |
| 8 years  Include trade names and                             | Business name  | Business name  |
| doing business as names                                      | EIN  | EIN  |
|  | EIN  | EIN  |
| 5. Where you live  |  | If Debtor 2 lives at a different address:  |
|  | 7649 S Aberdeen St Bsmt  | 7649 S Aberdeen St Bsmt  |
|  | Number Street  | Number Street  |
|  |  |  |
|  | Chicago Illinois 60620   | Chicago Illinois 60620   |
|  | City State Zip Code  | City State Zip Code  |
|  | Cook   | Cook   |
|  | County   | County   |
|  | If your mailing address is different from the one above, fill it in here. Note that the court will send any          | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to |
|  | notices to you at this mailing address.  | this mailing address.  |
|  |  |  |
|  | Number Street  | Number Street  |
|  |  |  |
|  | City State Zip Code  | City State Zip Code  |
| 6. Why you are   | Check one:   | Check one:   |
| choosing this district to file for bankruptcy                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
|  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   |
|  | Thave another reason. Explain. (Gee 20 0.0.0. 33 1400.)  | Thave another reason. Explain. (See 25 S.S.S. §§ 1400.)  |
|  | -  |  |
|  |  |  |
|  |  | -  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 3 of 70

Reed-Jackson Debtor 1 Lafrance Case number (if known) Middle Name First Name Last Name Part 2: **Tell the Court About Your Bankruptcy Case** 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy Code you Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. are choosing to file Chapter 7 under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for fee more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for ☐ No. bankruptcy within the last 8 years? Yes. District Northern District of Illinois Case number MM / DD / YYYY 1/18/2013 When District Northern District of Illinois Case number 13-02092 MM / DD / YYYY Northern District of Illinois When 12/1/2014 14-43090 District Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes. Debtor Relationship to you spouse who is not When Case number, if known filing this case with MM / DD / YYYY you, or by a business Relationship to you partner, or by an Case number, if known affiliate? MM / DD / YYYY 11. Do you rent your No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 4 of 70

Reed-Jackson Debtor 1 Lafrance \_\_ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 5 of 70

Debtor 1 Lafrance Reed-Jackson Case number (if known)

Middle Name First Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit ✓ I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 6 of 70

Reed-Jackson Debtor 1 Lafrance Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Lafrance Reed-Jackson /s/ Neva Reed-Jackson Signature of Debtor 1 Signature of Debtor 2 Executed on \_ 12/12/2016 Executed on \_ 12/12/2016 MM / DD / YYYY MM / DD / YYYY

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 7 of 70

| Debtor 1 Lafrance                                |                           | Reed-Jackson             | Case number (if I         | known)  |
|--|---------------------------|--------------------------|---------------------------|---|
| First Name                                       | Middle Name               | Last Name                |                           |   |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 12,   | or 13 of title 11, United | ave informed the debtor(s) about<br>d States Code, and have explained the<br>lso certify that I have delivered to the |
| If you are not                                   | debtor(s) the notice requ | uired by 11 U.S.C. § 3   | 42(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I  |
| represented by an                                | have no knowledge after   | r an inquiry that the in | formation in the sched    | ules filed with the petition is incorrect.  |
| attorney, you do not                             | •                         | , ,                      |                           | '   |
| need to file this page.                          | /s/ Ayah Abdelhadi        |                          | Date                      | 12/12/2016  |
|  | Signature of Attorney     |                          |                           | M / DD / YYYY   |
|  | olghataro or / titolhioj  | .0. 200.0.               |                           |   |
|  |                           |                          |                           |   |
|  | Ayah Abdelhadi            |                          |                           |   |
|  | Printed name              |                          |                           |   |
|  |                           |                          |                           |   |
|  | Semrad Law Firm           |                          |                           |   |
|  | Firm name                 |                          |                           |   |
|  | 11101 S. Western Av       | enue                     |                           |   |
|  | Street                    |                          |                           |   |
|  |                           |                          |                           |   |
|  |                           |                          |                           |   |
|  | Chicago                   |                          | Illinois                  | 60643   |
|  | City                      |                          | State                     | Zip Code  |
|  |                           |                          |                           |   |
|  | Contact phone             | 3123866421               | Email address             | aabdelhadi@semradlaw.com  |
|  |                           |                          |                           |   |
|  |                           |                          | Illinois                  |   |
|  | Bar number                |                          | State                     |   |

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 8 of 70

| Fill in this infor        | mation to identify your ca | ase:        |                      |
|---------------------------|----------------------------|-------------|----------------------|
| Debtor 1                  | Lafrance                   |             | Reed-Jackson         |
|                           | First Name                 | Middle Name | Last Name            |
| Debtor 2                  | Neva                       |             | Reed-Jackson         |
| (Spouse, if filing)       | First Name                 | Middle Name | Last Name            |
| United States E           | Bankruptcy Court for the:  | Northern    | District of Illinois |
| Case number<br>(If known) |                            |             | (State)              |

| Check if this is an |
|---------------------|
| amended filing      |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|  | Your assets           |
|--|-----------------------|
|  | Value of what you own |
| . Schedule A/B: Property (Official Form 106A/B)  | \$0.00                |
| 1a. Copy line 55, Total real estate, from Schedule A/B   | Ψ0.00                 |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$5,800.00            |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$5,800.00            |
| Part 2: Summarize Your Liabilities   |                       |
|  | Your liabilities      |
|  | Amount you owe        |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)                                  | \$12,955.00           |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D |                       |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  | \$0.00                |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                     |                       |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F                  | \$33,628.00           |
| Your total liabilities   | \$46,583.00           |
|  |                       |
| Part 3: Summarize Your Income and Expenses   |                       |
| 1. Schedule I: Your Income (Official Form 106I)  | \$1,586.56            |
| Copy your combined monthly income from line 12 of Schedule I   | \$1,360.30            |
| 5. Schedule J: Your Expenses (Official Form 106J)  | \$1,411.00            |
|  | . DI.411.UU           |

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 9 of 70

Reed-Jackson Debtor 1 Lafrance \_\_ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$863.61 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$14,167.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$14,167.00

9g. Total. Add lines 9a through 9f.

## Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 10 of 70

|   |   | Document Page 10 of 70  |   |
|---|---|---|---|
| Fill in this i                          | information to identify your case:  |   |   |
| Debtor 1                                | Lafrance  | Reed-Jackson  |   |
|   | First Name Mid  | dle Name Last Name  |   |
| Debtor 2<br>(Spouse, if fili            | Neva<br>ing) First Name Mide  | Reed-Jackson  dle Name Last Name  |   |
|   | - I not realite   |   |   |
| United Sta                              | tes Bankruptcy Court for the: Northern  | District of Illinois (State)  |   |
| Case num<br>(If known)                  | ber   | (Ottaloy  |   |
| Officia                                 | l Form 106A/B   |   | Check if this is an amended filing  |
| Sched                                   | dule A/B: Property  |   | 12/1  |
| category w<br>responsible<br>write your | where you think it fits best. Be as comple<br>e for supplying correct information. If mo<br>name and case number (if known). Answ | s. List an asset only once. If an asset fits in more the<br>te and accurate as possible. If two married people<br>are space is needed, attach a separate sheet to this<br>er every question. Land, or Other Real Estate You Own or Have | are filing together, both are equally s form. On the top of any additional pages,                 |
|   |   | est in any residence, building, land, or similar prop   |   |
| <b>✓</b>                                | No. Go to Part 2  | 3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,   | •   |
| _ H                                     | Yes. Where is the property?   |   |   |
|   |   | What is the property? Check all that apply.   | Do not deduct secured claims or exemptions. Put   |
| 1.1                                     | Street address, if available, or other description  | Single-family home  | the amount of any secured claims on Schedule D:<br>Creditors Who Have Claims Secured by Property. |
|   | Street address, if available, or other description  | Duplex or multi-unit building   |   |
|   |   | Condominium or cooperative  | Current value of the entire property? Current value of the portion you own?                       |
|   |   | Manufactured or mobile home   |   |
|   | Number Street   | Land  | Describe the nature of your ownership   |
|   |   | Investment property  Timeshare  | interest (such as fee simple, tenancy by  |
|   | City State Zip Code   | Other   | the entireties, or a life estate), if known.  |
|   |   | Who has an interest in the property? Check one.  Debtor 1 only  | Check if this is community property (see instructions)  |
|   |   | Debtor 2 only   |   |
|   |   | Debtor 1 and Debtor 2 only  |   |
|   |   | At least one of the debtors and another   |   |
|   |   | Other information you wish to add about this  | item, such as local   |
| If you                                  | own or have more than one, list here:   | property identification number:   |   |
| ii you v                                | own of have more than one, list here.   | What is the property? Check all that apply.   | Do not deduct secured claims or exemptions. Put   |
| 1.2                                     | Street address, if available, or other description  | Single-family home  | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.    |
|   | Street address, if available, or other description  | Duplex or multi-unit building   | , ,   |
|   |   | Condominium or cooperative  | Current value of the entire property? Current value of the portion you own?                       |
|   |   | Manufactured or mobile home   |   |
|   | Number Street   | Land Investment property  | Describe the nature of your ownership   |
|   |   | Timeshare   | interest (such as fee simple, tenancy by the entireties, or a life estate), if known.             |
|   | City State Zip Code   | Other   | ——————————————————————————————————————  |
|   |   | Who has an interest in the property? Check one.  Debtor 1 only  | Check if this is community property (see instructions)  |
|   |   | Debtor 2 only Debtor 1 and Debtor 2 only  |   |
|   |   | At least one of the debtors and another   |   |
|   |   | Line state of the state debate of the direction   |   |

Other information you wish to add about this item, such as local property identification number:

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 11 of 70

| Debtor 1    | Lafrance<br>First Name                                     | Middle Name                                | Reed-Jackson<br>Last Name  | _ Case number    | (if known)  |   |
|-------------|--|--|--|------------------|---|---|
| 1.3         | et address, if available, or ot                            | w  | what is the property? Check all that an Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land                     |                  | the amount of any secu  | claims or exemptions. Put red claims on Schedule D: ims Secured by Property.  Current value of the portion you own? |
| Nur<br>City | nber Street State  | Zip Code                                   | Investment property Timeshare Other  |                  | Describe the nature o interest (such as fee s the entireties, or a life | imple, tenancy by   |
|             |  | []<br>[]<br>[]<br>0                        | /ho has an interest in the property?  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and anotether information you wish to add at | ther             | Check if this is co<br>(see instructions)                               | mmunity property  |
|             | the dollar value of the po<br>ve attached for Part 1. Wi   | rtion you own for a<br>rite that number he | <b>.</b>   | ding any entries | for pages   |   |
| Do you ov   |  | equitable interest                         | in any vehicles, whether they are re   |                  |   |   |
|             | ans, trucks, tractors, sport ut                            |  | also report it on Schedule G: Executory<br>cycles  | Contracts and U  | Jnexpired Leases.   |   |
| 3.1         | Model:<br>Year:  | Dodge Charger 2010                         | Who has an interest in the proper one.  Debtor 1 only  | erty? Check      | the amount of any secu  | claims or exemptions. Put<br>ured claims on <i>Schedule D:</i><br>aims Secured by Property.                         |
|             | Approximate mileage: Other information: 2010 Dodge Charger | 100000                                     | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community p  |                  | Current value of the entire property? \$5100.00                         | Current value of the portion you own?<br>\$5100.00  |
| 3.2         | Make<br>Model:<br>Year:                                    |  | who has an interest in the proper one.  Debtor 1 only  | erty? Check      | the amount of any secu  | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.                                      |
|             | Approximate mileage: Other information:                    |  | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community p instructions)  |                  | Current value of the entire property?                                   | Current value of the portion you own?   |

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 12 of 70

|      | Lafrance<br>First Name  | Middle Name | Reed-Jackson  Last Name   | Case number   | ei (irknown)  |  |
|------|---|-------------|---|---|---|--|
| 3.3  | Make<br>Model:<br>Year:<br>Approximate mileage:   |             | Who has an interest in the prone.  Debtor 1 only Debtor 2 only  |   | Current value of the  | red claims on Schedule<br>hims Secured by Propert<br>Current value of the  |
|      | Other information:  |             | Debtor 1 and Debtor 2 only  At least one of the debtors  Check if this is communi instructions)   | and another   | entire property?  | portion you own?   |
| 3.4  | Make<br>Model:<br>Year:<br>Approximate mileage:   | <u> </u>    | Who has an interest in the prone.  Debtor 1 only  | roperty? Check  |   | red claims on Schedule<br>iims Secured by Propert  |
|      | Other information:  |             | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors  |   | Current value of the entire property?   | Current value of the portion you own?  |
|      |   |             | Check if this is communing instructions)  | ty property (see  |   |  |
| Exan | mples: Boats, trailers, motors  | •           | er recreational vehicles, other v<br>, fishing vessels, snowmobiles, m  | •   |   |  |
| Exan | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:   | •           | who has an interest in the prone.   | otorcycle accessori   | Do not deduct secured the amount of any secu  | red claims on <i>Schedule</i>  |
| Exan | nples: Boats, trailers, motors<br>No<br>Yes<br>Make   | •           | who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors   | otorcycle accessori roperty? Check  y and another             | Do not deduct secured   | red claims on Schedule<br>ims Secured by Propert   |
| 4.1  | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:<br>Year:<br>Approximate mileage:                              | •           | who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 2 only  | roperty? Check  y and another ty property (see                | Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured   | red claims on Schedule ims Secured by Propert Current value of the portion you own?  claims or exemptions. F   |
| 4.1  | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:                      | •           | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communicative instructions)   | roperty? Check  y and another ty property (see                | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classifications | red claims on Schedule ims Secured by Propert Current value of the portion you own?  claims or exemptions. Fired claims on Schedule ims Secured by Propert |
| 4.1  | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year: | •           | Who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communities instructions)  Who has an interest in the prone. Debtor 1 only | roperty? Check  y and another ty property (see roperty? Check | Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property?  Do not deduct secured the amount of any secu   | red claims on Schedule ims Secured by Propert Current value of the portion you own?  claims or exemptions. Fired claims on Schedule                        |

#### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 13 of 70

Debtor 1 Lafrance Reed-Jackson Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Goods \$350.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Electronics \$250.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$350.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Used Costume Jewelry \$50.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1000.00 for Part 3. Write that number here .....

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 14 of 70

Debtor 1 Lafrance Reed-Jackson Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Beverly Bank & Trust \$400.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 15 of 70

| Deb | tor 1 Latrance            | Middle Neme  | Heed-Jackson                     | Case number (if known)               |          |
|-----|---------------------------|--|----------------------------------|--------------------------------------|----------|
| 20. |                           | Middle Name orate bonds and other negotial                             |                                  |                                      |          |
|     |                           | include personal checks, cashiers<br>ents are those you cannot transfe |                                  |                                      |          |
|     | ✓ No                      | ,  |                                  | 3                                    |          |
|     | Yes. Give specific        |  |                                  |                                      |          |
|     | information about         | Issuer name:   |                                  |                                      |          |
|     | them                      |  |                                  |                                      |          |
|     |                           |  |                                  |                                      |          |
|     |                           |  |                                  |                                      |          |
| 21. | Retirement or pension     |  |                                  |                                      | -        |
|     | Examples: Interests in If | RA, ERISA, Keogh, 401(k), 403(b  | ), thrift savings accounts, or o | ther pension or profit-sharing plans |          |
|     | No                        | Type of account:   | Institution name:                |                                      |          |
|     | Yes. List each account    | 401(k) or similar plan:  |                                  |                                      |          |
|     | separately.               |  |                                  |                                      |          |
|     |                           | Pension plan:  |                                  |                                      |          |
|     |                           | IRA:   |                                  |                                      |          |
|     |                           | Retirement account:  | -                                |                                      | <u> </u> |
|     |                           | Keogh:   |                                  |                                      | _        |
|     |                           | Additional account:  |                                  |                                      |          |
|     |                           | Additional account:  |                                  |                                      | -        |
| 22. | Security deposits and     |  |                                  |                                      | -        |
|     | Examples: Agreements      | d deposits you have made so that with landlords, prepaid rent, publi   |                                  |                                      |          |
|     | companies, or others      |  |                                  |                                      |          |
|     | <b>✓</b> No               |  | Institution name:                |                                      |          |
|     | Yes                       | Electric:  |                                  |                                      |          |
|     |                           | Gas:   |                                  |                                      | _        |
|     |                           | Heating oil:   |                                  |                                      | _        |
|     |                           | Security deposit on rental unit:                                       |                                  |                                      | _        |
|     |                           | Prepaid rent:  |                                  |                                      |          |
|     |                           | Telephone:   |                                  |                                      | _        |
|     |                           | Water:   |                                  |                                      |          |
|     |                           | Rented furniture:  |                                  |                                      |          |
|     |                           | Other:   |                                  |                                      | -        |
| 23. | Annuities (A contract fo  | or a periodic payment of money to                                      | you, either for life or for a nu | mber of years)                       | _        |
|     | <b>✓</b> No               |  |                                  |                                      |          |
|     | Yes                       | Issuer name and description:   |                                  |                                      |          |
|     |                           |  |                                  |                                      |          |
|     |                           |  |                                  |                                      |          |
|     |                           |  |                                  |                                      |          |
|     |                           |  |                                  |                                      |          |

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 16 of 70

| Debt | or 1 Lafrance<br>First Name  | Middle N   | Reed-Jackson  Name Last Name  | Case number (if known)   |   |
|------|--|--|---|--|---|
| 24.  |  | Middle N<br>n education IRA. in an acc   | count in a qualified ABLE program, or under   | a qualified state tuition program.   |   |
|      |  | 530(b)(1), 529A(b), and 529(   |   |  |   |
|      | ✓ No  Yes  | Institution name and descrip   | otion. Separately file the records of any interests   | .11 U.S.C. § 521(c):   |   |
|      |  |  |   |  | -   |
|      |  |  |   |  |   |
| 25.  |  | able or future interests in por your benefit   | property (other than anything listed in line 1  | ), and rights or powers  |   |
|      | <b>√</b> No  |  |   |  |   |
|      | Yes. Desc  | ribe   |   |  |   |
|      |  |  |   |  |   |
| 26.  | -  |  | secrets, and other intellectual property<br>es, proceeds from royalties and licensing agreem                                    | nents  |   |
|      | <b>✓</b> No  |  |   |  |   |
|      | Yes. Desc  | ribe   |   |  |   |
| 0.7  |  |  | :::t-:::::::::::::::::::::::::::::::::  |  |   |
| 27.  |  | nchises, and other general<br>Iding permits, exclusive licens  | ses, cooperative association holdings, liquor lice  | enses, professional licenses   |   |
|      | <b>✓</b> No  |  |   |  |   |
|      | Yes. Desc  | ribe   |   |  |   |
|      |  |  |   |  |   |
| Mar  |  | the average to varia   |   |  | Current value of the  |
| Mor  | ney or propei  | ty owed to you?  |   |  | Current value of the portion you own?  Do not deduct secured claims or exemptions.  |
|      | ney or propei  |  |   |  | portion you own?  |
|      | Tax refunds o  | wed to you   |   |  | portion you own?  Do not deduct secured claims or exemptions.   |
|      | Tax refunds or  ✓ No  — Yes. Give sabou  | wed to you specific information t them, including whether  |   | Federal:   | portion you own? Do not deduct secured claims or exemptions.  |
|      | Tax refunds or  No Yes. Give s about   | wed to you specific information  |   | Federal:<br>State:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  |
| 28.  | Tax refunds or  ✓ No  Yes. Give s about you a and f  | specific information t them, including whether already filed the returns he tax years  |   |  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  |
| 28.  | Tax refunds or  No Yes. Give s about you a and t   | specific information t them, including whether already filed the returns he tax years  | spousal support, child support, maintenance, d  | State: Local:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                                      |
| 28.  | Tax refunds or  ✓ No  Yes. Give sabout you a and fi  Family support Examples: Past   | specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, s  | spousal support, child support, maintenance, d  | State:  Local: ivorce settlement, property settlemen   | portion you own?  Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                                     |
| 28.  | Tax refunds or  ✓ No  Yes. Give sabout you a and fi  Family support Examples: Past   | specific information t them, including whether already filed the returns he tax years  | spousal support, child support, maintenance, d  | State: Local: ivorce settlement, property settlement   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t  \$0.00                           |
| 28.  | Tax refunds or  ✓ No  Yes. Give sabout you a and fi  Family support Examples: Past   | specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, s  | spousal support, child support, maintenance, d  | State: Local: ivorce settlement, property settlemen Alimony: Maintenance:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t  \$0.00                           |
| 28.  | Tax refunds or  ✓ No  Yes. Give sabout you a and fi  Family support Examples: Past   | specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, s  | spousal support, child support, maintenance, d  | State: Local: ivorce settlement, property settlemen Alimony: Maintenance: Support:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00  \$0.00  t  \$0.00 \$0.00                     |
| 28.  | Tax refunds or  ✓ No  Yes. Give sabout you a and fi  Family support Examples: Past   | specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, s  | spousal support, child support, maintenance, d  | State: Local: ivorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:                      | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28.  | Tax refunds or  ✓ No  ☐ Yes. Give s about you a and f  Family suppor Examples: Past ✓ No ☐ Yes. Give s  Other amount                 | specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, s specific information   |   | State: Local: ivorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00  \$0.00  t  \$0.00 \$0.00                     |
| 28.  | Tax refunds or  ✓ No  Yes. Give s about you a and to  Family support Examples: Past ✓ No  Yes. Give s  Other amount Examples: Unp    | specific information t them, including whether already filed the returns he tax years  | spousal support, child support, maintenance, d ce payments, disability benefits, sick pay, vacationans you made to someone else | State: Local: ivorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28.  | Tax refunds on  ✓ No  ✓ Yes. Give s about you a and if  Family suppor Examples: Past ✓ No  ✓ Yes. Give s  Other amount Examples: Unp | specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, s specific information s someone owes you aid wages, disability insurance ial Security benefits; unpaid to | ce payments, disability benefits, sick pay, vacatio   | State: Local: ivorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28.  | Tax refunds on  No Yes. Give s about you a and t  Family suppor Examples: Past  No Yes. Give s  Other amount Examples: Unp           | specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, s specific information s someone owes you aid wages, disability insurance ial Security benefits; unpaid to | ce payments, disability benefits, sick pay, vacatio   | State: Local: ivorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 17 of 70

| Deb  | tor 1    | Lafrance                                     |  | Reed-Jackson   | Case number (if known)                        |  |
|------|----------|--|--|--|---|--|
|      |          | First Name                                   | Middle Name  | Last Name  |   |  |
| 31.  |          | erests in insurance<br>amples: Health, disab |  | alth savings account (HSA); credit, hon                            | neowner's, or renter's insurance              |  |
|      | <b>✓</b> | No Yes. Name the insured of each policy and  |  | Company name:  | Beneficiary:                                  | Surrender or refund value:   |
| 32.  | If y     |  | y of a living trust, expect                        | someone who has died proceeds from a life insurance policy,        | or are currently entitled to receive          |  |
|      |          | Yes. Describe                                |  |  |   |  |
| 33.  |          |  |  | you have filed a lawsuit or made a urance claims, or rights to sue | demand for payment                            |  |
| 34.  |          | her contingent and                           | unliquidated claims of                             | f every nature, including countercla                               | nims of the debtor and rights                 |  |
|      | <b>✓</b> | No<br>Yes. Describe                          |  |  |   |  |
| 35.  | An       | y financial assets y                         | ou did not already list                            |  |   |  |
|      | <b>✓</b> | No<br>Yes. Describe                          |  |  |   |  |
| 36.  |          |  | -  | m Part 4, including any entries for p                              |   | \$400.00   |
| Part | 5:       | Describe Any B                               | usiness-Related Pro                                | operty You Own or Have an Inte                                     | erest In. List any real estate in Part        | 1.   |
| 37.  | Do       | you own or have a                            | ny legal or equitable in                           | terest in any business-related prop                                | erty?   |  |
|      | <b>✓</b> | No. Go to Part 6. Yes. Go to line 38.        |  |  | <b>p</b> D                                    | current value of the ortion you own? o not deduct secured claims rexemptions |
| 38.  | _        | _  | or commissions you alr                             | eady earned  |   |  |
|      |          | No<br>Yes. Describe                          |  |  |   |  |
| 39.  |          |  | nishings, and supplies<br>ated computers, software | e, modems, printers, copiers, fax mach                             | nines, rugs, telephones, desks, chairs, elect | ronic devices  |
|      | <b>✓</b> | No<br>Yes. Describe                          |  |  |   |  |
|      |          |  |  |  |   |  |

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 18 of 70

| Debt   | tor 1 Lafrance                                   | Reed-Jackson                                  | Case number (if known)       |  |
|--------|--|---|------------------------------|--|
|        | First Name Middle Nam                            |   |                              |  |
| 40.    | Machinery, fixtures, equipment, supplies yo      | ou use in business, and tools of your trac    | de                           |  |
|        | <b>✓</b> No                                      |   |                              |  |
|        | Yes. Describe                                    |   |                              |  |
|        | Tes. Describe                                    |   |                              |  |
|        |  |   |                              | I .  |
| 41     | Inventory  |   |                              |  |
| 71.    | inventory  |   |                              |  |
|        | <b>✓</b> No                                      |   |                              |  |
|        | Yes. Describe                                    |   |                              |  |
|        |  |   |                              |  |
|        |  |   |                              |  |
| 42.    | Interests in partnerships or joint ventures      |   |                              |  |
|        | ✓ No   |   |                              |  |
|        |  | Name of entity:                               | % of ownership:              |  |
|        | Yes. Give specific information about             |   |                              |  |
|        | them   |   |                              | <del>-</del>                                   |
|        |  |   |                              | <u> </u>                                       |
|        |  |   |                              |  |
|        |  |   | <del></del>                  |  |
| 43.    | Customer lists, mailing lists, or other compil   | ations  |                              |  |
|        | <b>✓</b> No                                      |   |                              |  |
|        |  | fiable information (as defined in 11 U.S.C. § | § 101(41A))?                 |  |
|        |  | ·   | . ,,                         |  |
|        | No   |   |                              |  |
|        | Yes. Describe                                    |   |                              |  |
|        | ш  |   |                              |  |
| 44.    | Any business-related property you did not a      | already list                                  |                              |  |
|        | ✓ No   |   |                              |  |
|        |  |   |                              | <u> </u>                                       |
|        | Yes. Give specific                               |   |                              |  |
|        | information                                      |   |                              | <del></del>                                    |
|        |  |   |                              |  |
|        |  |   |                              |  |
|        |  |   |                              | <del></del>                                    |
|        |  |   |                              | <u> </u>                                       |
|        |  |   |                              |  |
|        |  | -   |                              | <del></del>                                    |
|        |  |   |                              |  |
|        | dd the dollar value of all of your entries from  |   |                              |  |
| for Pa | art 5. Write that number here                    |   |                              |  |
|        | 6: Describe Any Farm- and Commerc                | cial Fishing-Related Property You             | Own or Have an Interest In   |  |
| Part   | If you own or have an interest in farmland, list |   | Own or riave an interest in. |  |
|        | •  |   |                              |  |
| 46.    | Do you own or have any legal or equitable        | interest in any farm- or commercial fish      | ing-related property?        |  |
|        | No. Go to Part 7.                                |   |                              | Current value of the                           |
|        | Yes. Go to line 47.                              |   |                              | portion you own?  Do not deduct secured claims |
|        | Too. do to mile 17.                              |   |                              | or exemptions                                  |
| 47     | Farm animals                                     |   |                              |  |
| ٦,.    | Examples: Livestock, poultry, farm-raised fish   |   |                              |  |
|        |  |   |                              |  |
|        | ✓ No   |   |                              |  |
|        | Yes. Describe                                    |   |                              |  |
|        |  |   |                              | 1  |
| 1      |  |   |                              |  |

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 19 of 70

| Debt         | tor 1 Lafrance First Name  |  | leed-Jackson<br>ast Name | Case number (if known)       |             |
|--------------|----------------------------|--|--------------------------|------------------------------|-------------|
| 48.          | Crops-either growing       |  |                          |                              |             |
|              | No Yes. Describe           |  |                          |                              |             |
| 49.          | Farm and fishing equip     | oment, implements, machinery, fixture            | es, and tools of trade   |                              |             |
|              | <b>✓</b> No                |  |                          |                              |             |
|              | Yes. Describe              |  |                          |                              |             |
| 50.          | Farm and fishing suppl     | lies, chemicals, and feed                        |                          |                              |             |
|              | <b>✓</b> No                |  |                          |                              |             |
|              | Yes. Describe              |  |                          |                              |             |
|              |                            |  |                          |                              |             |
| 51.          | Any farm- and comme        | rcial fishing-related property you did r         | not already list         |                              |             |
|              | ✓ No  Yes. Describe        |  |                          |                              |             |
|              | Tes. Describe              |  |                          |                              |             |
|              |                            |  |                          | Γ                            |             |
|              |                            | l of your entries from Part 6, including<br>here |                          |                              |             |
| <b>&gt;</b>  |                            |  |                          | L                            |             |
|              |                            |  |                          |                              |             |
| Part         | 7: Describe All Pro        | perty You Own or Have an Intere                  | st in That You Did Not   | t List Above                 |             |
| 53.          | Do you have other prop     | perty of any kind you did not already li         |                          |                              |             |
|              |                            | s, country club membership                       |                          |                              |             |
|              | ✓ No  Yes. Give specific   |  |                          |                              |             |
|              | information                |  |                          |                              |             |
|              |                            |  |                          |                              |             |
| - 4 A        | dd 4b a dallau walee af al | l of autois a fram Dant 7. White the             |                          |                              | _           |
| 54. A        | dd the dollar value of al  | I of your entries from Part 7. Write tha         | it number nere           |                              |             |
|              |                            |  |                          |                              |             |
|              |                            |  |                          |                              |             |
|              |                            |  |                          |                              |             |
| Part         | 8: List the Totals of      | Each Part of this Form                           |                          |                              |             |
| 55. <b>I</b> | Part 1: Total real estate  | , line 2   |                          | <b>&gt;</b>                  |             |
| 56. <b>r</b> | oart 2 total vehicles, lin | e 5  | ¢5100.00                 |                              |             |
| 57. <b>P</b> | art 3: Total personal an   | d household items, line 15                       | \$5100.00<br>\$1000.00   |                              |             |
| 58. <b>P</b> | art 4: Total financial as  | sets, line 36                                    | \$400.00                 |                              |             |
| 59. <b>i</b> | Part 5: Total business-re  | elated property, line 45                         | φ400.00                  |                              |             |
|              |                            | ishing-related property, line 52                 |                          |                              |             |
|              | Part 7: Total other prop   |  |                          |                              |             |
|              |                            | Add lines 56 through 61.                         | #0500.00                 |                              | фолого го   |
|              | ,                          | <b>V</b>   | \$6500.00                | Copy personal property total | + \$6500.00 |
|              |                            |  |                          |                              | \$6500.00   |
| 63. <b>T</b> | otal of all property on S  | chedule A/B. Add line 55 + line 62               |                          |                              |             |

#### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 20 of 70

| Fill in this information to identify your case: |                           |             |                              |  |
|---|---------------------------|-------------|------------------------------|--|
| Debtor 1  | Lafrance                  |             | Reed-Jackson                 |  |
|   | First Name                | Middle Name | Last Name                    |  |
| Debtor 2  | Neva                      |             | Reed-Jackson                 |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name                    |  |
| United States E                                 | Sankruptcy Court for the: | Northern    | District of Illinois (State) |  |
| Case number<br>(If known)                       |                           |             | (otate)                      |  |

### Official Form 106C

### Check if this is an amended filing

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | t 1: Identify the Property You Claim          | n as Exempt                         |   |                                    |
|----|---|-------------------------------------|---|------------------------------------|
| 1. | Which set of exemptions are you claiming      | ng? Check one only, ev              | ren if your spouse is filing with you.  |                                    |
|    | You are claiming state and federal r          | onbankruptcy exemp                  | otions. 11 U.S.C. § 522(b)(3)   |                                    |
|    | You are claiming federal exemption:           | s. 11 U.S.C. § 522(b)(2             | 2)  |                                    |
| 2. | For any property you list on Schedule A       | B that you claim as e               | xempt, fill in the information below.   |                                    |
|    | Brief description of the property and         | Current value of                    | Amount of the exemption you claim   | Specific laws that allow exemption |
|    | line on Schedule A/B that lists this property | the portion you<br>own              | Check only one box for each exemption.  |                                    |
|    |   | Copy the value from<br>Schedule A/B |   |                                    |
|    | Brief   |                                     |   | 735 ILCS 5/12-1001(b)              |
|    | description:                                  | \$200.00                            | \$200.00  |                                    |
|    | Beverly Bank & Trust Line from                |                                     | 100% of fair market value, up to any  | -                                  |
|    | Schedule A/B: 17                              |                                     | applicable statutory limit  |                                    |
|    | Brief   |                                     |   | 735 ILCS 5/12-1001(b)              |
|    | description:                                  | \$175.00                            | \$175.00  |                                    |
|    | Misc. Household Goods Line from               |                                     | 100% of fair market value, up to any  | -                                  |
|    | Schedule A/B: 06                              |                                     | applicable statutory limit  |                                    |
| 3. | <b>✓</b> No                                   | ry 3 years after that for a         | 375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case? |                                    |

#### Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Case 16-39102 Doc 1 Page 21 of 70 Document

Debtor 1 Lafrance Reed-Jackson Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(a) \$175.00 description: **✓** \$175.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 Brief 735 ILCS 5/12-1001(b) \$125.00 description: **✓** \$125.00 Misc. Electronics 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 07 Brief 735 ILCS 5/12-1001(b) \$25.00 description: **✓** \$25.00 **Used Costume Jewelry** 100% of fair market value, up to any Line from applicable statutory limit

Schedule A/B:

12

Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main

|                             |  | Doc   | ument Page 22 of                                | 70  |   |                                    |
|-----------------------------|--|---|---|---|---|------------------------------------|
| Fill in this                | information to identify your ca  | se:   |   |   |   |                                    |
| Debtor 1                    | Lafrance<br>First Name   | Middle Name   | Reed-Jackson<br>Last Name                       |   |   |                                    |
| Debtor 2<br>(Spouse, if fil | Neva<br>ing) First Name  | Middle Name   | Reed-Jackson<br>Last Name                       |   |   |                                    |
|                             | . ,  | Northern  | District of Illinois (State)                    |   |   |                                    |
| Case num<br>(If known)      | ber  |   |   |   |   |                                    |
| Offici                      | al Form 106D   |   |   | 1   |   | Check if this is an amended filing |
| Sche                        | dule D: Credito  | ors Who Have  | e Claims Secure                                 | ed by Prop  | ertv  | 12/15                              |
| 1. Do a                     | case number (if known).  In y creditors have claims set to the control of the con | ecured by your property   | er the entries, and attach it to to             | ·   |   | es, write your                     |
| Part 1:                     | List All Secured Claims  |   |   |   |   |                                    |
| sep                         | t all secured claims. If a credit<br>arately for each claim. If more th<br>Part 2. As much as possible, list<br>ne.  | nan one creditor has a partic   | ular claim, list the other creditors            | Column A  Amount of claim  Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any  |
|                             | PITAL ONE AUTO FINAN   | Describe the property th  | at secures the claim:                           | \$12,955.00   | \$5,100.00  | \$7,855.00                         |
| PLI<br>City<br>Wh           | ANO Texas 75093 State ZIP Code o owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt te debt was 1/1/2012  | Contingent Unliquidated Disputed  Nature of lien. Check all to a greement you make car loan) Statutory lien (such as Judgment lien from a Other (including a right) | tax lien, mechanic's lien) lawsuit t to offset) |   |   |                                    |
|                             | urred  | Last 4 digits of account  | number 1001                                     |   |   |                                    |

Add the dollar value of your entries in Column A on this page. Write that number

incurred

here:

\$12,955.00

Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 23 of 70

| Fill in this                                   | information to identify your ca   | ase:   |   |   |   |
|--|---|--|---|---|---|
| Debtor 1                                       | Lafrance<br>First Name  | Middle Name  | Reed-Jackson<br>Last Name   | _   |   |
| Debtor 2<br>(Spouse, if fil                    | Neva<br>ing) First Name   | Middle Name  | Reed-Jackson<br>Last Name   | _   |   |
|  | ntes Bankruptcy Court for the:  | Northern   | District of Illinois (State)  | _   |   |
| Case num<br>(If known)                         | ber   |  |   | _   |   |
| Officia  | I Form 106E/F   |  |   | <u>-</u>  | Check if this is an amended filing  |
| Sche   | dule E/F: Cre   | ditors Who   | Have Unsecu   | red Claims  | 12/15   |
| other party<br>Form 106 <i>A</i><br>claims tha | y to any executory contracts<br>A/B) and on Schedule G: Exe<br>tt are listed in Schedule D: C | or unexpired leases that<br>cutory Contracts and Une<br>reditors Who Hold Claims | t could result in a claim. Also<br>expired Leases (Official Form<br>s Secured by Property. If mor | o list executory contracts<br>i 106G). Do not include an<br>e space is needed, copy t | n NONPRIORITY claims. List the on Schedule A/B: Property (Official by creditors with partially secured he Part you need, fill it out, number rite your name and case number (if |
| Part 1:  | List All of Your PRIORITY   | Unsecured Claims   |   |   |   |
| <b>✓</b>                                       | ny creditors have priority un<br>No. Go to Part 2.<br>Yes.                                    | secured claims against y   | ou?   |   |   |
| listed   | l, identify what type of claim it i   | s. If a claim has both priori  | ty and nonpriority amounts, list  | that claim here and show b  | arately for each claim. For each claim oth priority and nonpriority amounts. ority unsecured claims, fill out the   |

Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Priority

amount

Nonpriority

amount

Total

claim

#### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 24 of 70

Debtor 1 Lafrance Reed-Jackson Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 BK OF AMER \$1,689.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5/1/2014 POB 15026 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILMINGTON 19801 Delaware Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify \_ CreditCard **✓** No Yes Capital One Bank \$2,742.00 Last 4 digits of account number Nonpriority Creditor's Name 11013 W. Broad When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated <u>23</u>060 Glen Allen Virginia City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Credit Card Is the claim subject to offset? **✓** No Yes CDA/PONTIAC 4.3 \$280.00 Last 4 digits of account number Nonpriority Creditor's Name 415 E MAIN When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 61364 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only  $\overline{}$ that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Foundation Emergency Services Is the claim subject to offset? No Yes

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 25 of 70

Debtor 1 Lafrance Reed-Jackson Case number (if known) Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Contin                 |   |             |
|--------|--|---|-------------|
|        | After listing any entries on this page, number them beginn | ning with 4.5, followed by 4.6, and so forth.   | Total claim |
| 4.4    | Chase Bank   | — Last 4 digits of account number   | \$1.00      |
|        | Nonpriority Creditor's Name<br>P.O. Box 659732             | When was the debt incurred? n/a   |             |
|        | Number Street  | <u>—</u>  |             |
|        |  | As of the date you file, the claim is: Check all that apply.  |             |
|        |  | Contingent  |             |
|        | San Antonio Texas 78265                                    | Unliquidated  |             |
|        | City State Zip Code  | Disputed  |             |
|        | Who incurred the debt? Check one.  Debtor 1 only           | Type of NONPRIORITY unsecured claim:  |             |
|        | <u> </u>   | Student loans   |             |
|        | Debtor 2 only  | Obligations arising out of a separation agreement or divorce  |             |
|        | Debtor 1 and Debtor 2 only                                 | that you did not report as priority claims  |             |
|        | At least one of the debtors and another                    | Debts to pension or profit-sharing plans, and other similar   |             |
|        | Check if this claim relates to a community debt            | debts  Other. Specify  Overdraft Fees   |             |
|        | Is the claim subject to offset?                            | Other. Specify Overdraft Fees   |             |
|        | ✓ No   |   |             |
|        | Yes  |   |             |
| 4.5    |  |   | Φ0.400.00   |
| 4.5    | City of Chicago Parking Nonpriority Creditor's Name        | Last 4 digits of account number   | \$6,100.00  |
|        | 121 N. LaSalle St # 107A                                   | When was the debt incurred?n/a  |             |
|        | Number Street  | As of the date you file, the claim is: Check all that apply.  |             |
|        |  | Contingent  |             |
|        |  | Unliquidated  |             |
|        | ChicagoIllinois60602CityStateZip Code                      | <b>ㅡ 날</b> '  |             |
|        | Who incurred the debt? Check one.                          | Disputed  |             |
|        | Debtor 1 only  | Type of NONPRIORITY unsecured claim:  |             |
|        | Debtor 2 only  | Student loans   |             |
|        | Debtor 1 and Debtor 2 only                                 | Obligations arising out of a separation agreement or divorce  |             |
|        | <u>'</u>   | that you did not report as priority claims  |             |
|        | At least one of the debtors and another                    | Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|        | Check if this claim relates to a community debt            | Other. Specify Parking Tickets  |             |
|        | Is the claim subject to offset?                            | <u> </u>  |             |
|        | ✓ No   |   |             |
|        | Yes  |   |             |
| 4.6    | CREDIT ACCEPTANCE  | Leat 4 digita of account growth a COOO  | \$4,875.00  |
|        | Nonpriority Creditor's Name                                | Last 4 digits of account number 9388  | <u> </u>    |
|        | PO BOX 513<br>Number Street                                | When was the debt incurred? 8/1/2011  |             |
|        | Number Street  | As of the date you file, the claim is: Check all that apply.  |             |
|        | Occalle Calal  | Contingent  |             |
|        | Southfield Michigan 48037 City State Zip Code              | Unliquidated  |             |
|        | Who incurred the debt? Check one.                          | Disputed  |             |
|        | Debtor 1 only  | Type of NONPRIORITY unsecured claim:  |             |
|        | Debtor 2 only  | <u></u>   |             |
|        | Debtor 1 and Debtor 2 only                                 | Student loans   |             |
|        | At least one of the debtors and another                    | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|        | 님  | Debts to pension or profit-sharing plans, and other similar   |             |
|        | Check if this claim relates to a community debt            | debts   |             |
|        | Is the claim subject to offset?                            | Other. Specify 033 Automobile   |             |
|        | ✓ No   | <del></del>   |             |
|        | Yes  |   |             |

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 26 of 70

Debtor 1 Lafrance Reed-Jackson Case number (if known) Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continu   | ation Page  |             |
|--------|---|---|-------------|
|        | After listing any entries on this page, number them beginning   | ng with 4.5, followed by 4.6, and so forth.   | Total claim |
| 4.7    | CREDIT MANAGEMENT LP Nonpriority Creditor's Name 4200 INTERNATIONAL PKWY Number Street  | When was the debt incurred? n/a  As of the date you file, the claim is: Check all that apply.   | \$386.00    |
|        | CARROLLTON Texas 75007 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offset?  No  Yes   | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify US CELLULAR   |             |
| 4.8    | DEPT OF ED/NAVIENT  Nonpriority Creditor's Name PO Box 9635  Number Street  Wilkes Barre Pennsylvania 18773  City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  Yes | Last 4 digits of account number   | \$5,238.00  |
| 4.9    | DEPT OF ED/NAVIENT Nonpriority Creditor's Name PO Box 9635 Number Street  Wilkes Barre Pennsylvania 18773 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offset?  Yes     | When was the debt incurred? 11/1/2009  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | \$4,232.00  |

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 27 of 70

Debtor 1 Lafrance Reed-Jackson Case number (if known) \_\_\_\_\_\_\_

| Part 2: Your NONPRIORITY Unsecured Claim                                      | s - Continuation Page  |
|---|--|
| After listing any entries on this page, number                                | them beginning with 4.5, followed by 4.6, and so forth.  Total claim   |
| 4.10 DEPT OF ED/NAVIENT Nonpriority Creditor's Name PO Box 9635 Number Street | Last 4 digits of account number 1102 \$2,418.00  When was the debt incurred? 11/1/2009  As of the date you file, the claim is: Check all that apply.   |
|   | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify |
|   | Last 4 digits of account number  |
|   | Last 4 digits of account number  |

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 28 of 70

Debtor 1 Lafrance Reed-Jackson Case number (if known) Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continua  | ation Page   |             |
|--------|---|--|-------------|
|        | After listing any entries on this page, number them beginning   | ing with 4.5, followed by 4.6, and so forth.   | Total claim |
| 4.13   | MB Financial Nonpriority Creditor's Name 990 N. York Number Street  | Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.   | \$1.00      |
|        | Elmhurst Illinois 60126 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offset?  No  Yes  | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Overdraft Fees |             |
| 4.14   | MCSI INC Nonpriority Creditor's Name PO BOX 327 Number Street  PALOS HEIGHTS Illinois 60463 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes                | When was the debt incurred?  | \$200.00    |
| 4.15   | MIDLAND FUNDING Nonpriority Creditor's Name 8875 AERO DR STE 200 Number Street  SAN DIEGO California 92123 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | When was the debt incurred?  | \$1,117.00  |

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 29 of 70

 Debtor 1 First Name
 Lafrance Reed-Jackson Last Name
 Case number (if known)

| After listing any entries on this page, number them begi | nning with 4.5, followed by 4.6, and so forth.  | Total claim |
|--|---|-------------|
| OSI Collections  | Look delimite of account mountain   | \$76.00     |
| Nonpriority Creditor's Name                              | Last 4 digits of account number   | Ψ. σ.σσ     |
| 7720 E. Belleview Ave B #303<br>Number Street            | When was the debt incurred?n/a  |             |
| Number Street  | As of the date you file, the claim is: Check all that apply.  |             |
|  | Contingent  |             |
| Englewood Colorado 80111                                 | Unliquidated  |             |
| City State Zip Code                                      | Disputed  |             |
| Who incurred the debt? Check one.                        | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 1 only  | Student loans   |             |
| Debtor 2 only  | 불   |             |
| Debtor 1 and Debtor 2 only                               | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
| At least one of the debtors and another                  | Debts to pension or profit-sharing plans, and other similar debts                                       |             |
| Check if this claim relates to a community debt          | Other. Specify Collecting for Radiology   |             |
| Is the claim subject to offset?                          |   |             |
| <b>✓</b> No  |   |             |
| Yes  |   |             |
| portfolio recovery                                       | Lock A distance of a community of   | \$839.00    |
| Nonpriority Creditor's Name                              | Last 4 digits of account number   |             |
| P.O. Box 12914  Number Street                            | When was the debt incurred?n/a  |             |
| Number Street  | As of the date you file, the claim is: Check all that apply.  |             |
|  | Contingent  |             |
| Norfolk Virginia 23541                                   | Unliquidated  |             |
| City State Zip Code                                      | Disputed  |             |
| Who incurred the debt? Check one.                        |   |             |
| Debtor 1 only  | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 2 only  | Student loans   |             |
| Debtor 1 and Debtor 2 only                               | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
| At least one of the debtors and another                  | Debts to pension or profit-sharing plans, and other similar   |             |
| Check if this claim relates to a community debt          | debts   |             |
| Is the claim subject to offset?                          | Other. Specify Capital One Bank   |             |
| No   |   |             |
|  |   |             |
| Yes  |   |             |
| South Side Community Federal Credit Union                | Last 4 digits of account number   | \$1.00      |
| Nonpriority Creditor's Name<br>5401 S Wentworth Ave #25  | When was the debt incurred? n/a   |             |
| Number Street  | <del></del>   |             |
|  | As of the date you file, the claim is: Check all that apply.  |             |
|  | Contingent  |             |
| Chicago Illinois 60609                                   | Unliquidated  |             |
| City State Zip Code                                      | Disputed  |             |
| Who incurred the debt? Check one.  Debtor 1 only         | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 2 only  | Student loans   |             |
| <u>'</u>   | Obligations arising out of a separation agreement or divorce  |             |
| Debtor 1 and Debtor 2 only                               | that you did not report as priority claims  |             |
| At least one of the debtors and another                  | Debts to pension or profit-sharing plans, and other similar   |             |
| Check if this claim relates to a community debt          | <ul><li>debts</li><li>Other. Specify</li><li>Overdraft Fees</li></ul>                                   |             |
| Is the claim subject to offset?                          | Other. Specify Overdraft Fees   |             |
| <b>✓</b> No  |   |             |
| Yes  |   |             |

Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 30 of 70

Debtor 1 Lafrance Reed-Jackson Case number (if known)

First Name Last Name Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$14,167.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar \$19,461.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$33,628.00 6j. Total. Add lines 6f through 6i.

Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 31 of 70

| Fill in this infor  | mation to identify your ca | ase:         |                      |
|---------------------|----------------------------|--------------|----------------------|
| Debtor 1            | Lafrance                   | Reed-Jackson |                      |
|                     | First Name                 | Middle Name  | Last Name            |
| Debtor 2            | Neva                       |              | Reed-Jackson         |
| (Spouse, if filing) | First Name                 | Middle Name  | Last Name            |
| United States E     | Bankruptcy Court for the:  | Northern     | District of Illinois |
| Case number         |                            |              | (State)              |

### Official Form 106G

### Check if this is an amended filing

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 32 of 70

| Fill in this information to identify your case: |            |              |                              |  |  |  |  |
|---|------------|--------------|------------------------------|--|--|--|--|
| Debtor 1  | Lafrance   | Reed-Jackson |                              |  |  |  |  |
|   | First Name | Middle Name  | Last Name                    |  |  |  |  |
| Debtor 2  | Neva       |              | Reed-Jackson                 |  |  |  |  |
| (Spouse, if filing)                             | First Name | Middle Name  | Last Name                    |  |  |  |  |
| United States Bankruptcy Court for the:         |            | Northern     | District of Illinois (State) |  |  |  |  |
| Case number ((fknown)                           |            |              |                              |  |  |  |  |

Check if this is an amended filing

### Official Form 106H

### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

|     | in randwor overy queenem  |                             |   |                           |   |
|-----|---|-----------------------------|---|---------------------------|---|
| 1.  | Do you have any codebtors? (If No Yes   | you are filing a joint case | e, do not list either spouse                      | e as a codebtor.)         |   |
| 2.  | California, Idaho, Louisiana, Neva  No. Go to line 3.  Yes. Did your spouse, form  No | da, New Mexico, Puerto      | Rico, Texas, Washington uivalent live with you at | , and Wisconsin the time? | he name and current address of that person.   |
|     | Name of your spouse, f  | ormer spouse, or legal ed   | quivalent   |                           |   |
|     | City  | State                       | Zip   | Code                      |   |
| 3.  | again as a codebtor only if that  | person is a guarantor       | or cosigner. Make sure                            | you have liste            | use is filing with you. List the person shown in line 2 d the creditor on <i>Schedule D</i> (Official Form 106D), chedule E/F, or <i>Schedule G</i> to fill out Column 2. |
|     | Column 1: Your codebtor   |                             |   |                           | ımn 2: The creditor to whom you owe the debt  |
|     |   |                             |   | Chec                      | ck all schedules that apply:  |
| 3.1 | Reed Jackson, Neva<br>Name  |                             |   | 🗆                         | Schedule D, line  |
|     | 7649 S Aberdeen St  | : Bsmt                      |   | <b>\rightarrow</b>        | Schedule E/F, line4.7; 4.8;   |
|     | Number Street   |                             |   |                           | 4.9; 4.10;  |
|     | Chicago   | Illinois                    | 60620   |                           | 4.11;<br>4.12;  |
|     | City  | State                       | Zip Code  |                           | 4.12,<br>4.13;<br>4.14;<br>4.15;<br>4.16;<br>4.17;<br>4.18  |
|     |   |                             |   | П                         | Schedule G, line  |

Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 33 of 70

|   |  | 200                                     | oarriorie                 | . ago co         | 0. 70             |   |
|---|--|---|---------------------------|------------------|-------------------|---|
| Fill in this in                                 | formation to identify  | your case:                              |                           |                  |                   |   |
| Debtor 1  | Lafrance   |   | Reed-Ja                   | ackson           |                   |   |
| 20010.  | First Name   | Middle Name                             | Last Na                   |                  | - Ch              | eck if this is:   |
| Debtor 2  | Neva   |   | Reed-Ja                   | ackson           |                   |   |
| (Spouse, if filing                              | First Name   | Middle Name                             | Last Na                   | me               | -   🗆             | An amended filing   |
| United States the:                              | Bankruptcy Court for   | Northern                                | _ District of Illing      |                  |                   | A supplement showing post-petition chapter 13 expenses as of the following date:  |
| Case number                                     | r  |   | `                         |                  | _                 | MM / DD / YYYY  |
| ,   | Form 1061  |   |                           |                  |                   | MIM / DD / YYYY   |
|   | Form 106I  |   |                           |                  |                   |   |
| Schedu  | le I: Your In  | come                                    |                           |                  |                   | 12/15   |
| spouse. If m<br>number (if k                    |  | l, attach a separate she<br>y question. |                           | _                | -                 | not include information about your ional pages, write your name and case  |
| 1 Fill in vo                                    |  |   | Debtor 1                  |                  |                   | Debtor 2  |
| informat  | ur employment<br>ion.  |   |                           |                  |                   |   |
| attach a s                                      | ve more than one job,<br>eparate page with<br>on about additional                                  | Employment status                       | Employer Not Employer     |                  |                   | Employed  Not Employed  |
| employer  | S.   | Occupation                              | Truck Driver              | •                |                   | _   |
|   | art time, seasonal, or oyed work.  | Employer's name                         | Swift Transp              | oortation Co.    |                   |   |
|   | on may include student<br>naker, if it applies.  | Employer's address                      | P.O. Box 29  Number Stree |                  |                   | Number Street   |
|   |  |   |                           |                  |                   |   |
|   |  |   | Phoenix<br>City           | Arizona<br>State | 85038<br>Zip Code | City State Zip Code   |
|   |  | How long employed there?                | 2 months                  |                  | Zip codo          |   |
| Estimate m spouse unle If you or you more space | ess you are separated.  Ir non-filing spouse have, attach a separate she  onthly gross wages, sale | the date you file this form             | combine the in            | oformation for a | -                 | write \$0 in the space. Include your non-filing or that person on the lines below. If you need  For Debtor 2 or non-filing spouse  \$0.00 |
| be.<br>3. Estima                                | te and list monthly ove  | rtime pay.                              |                           | 3.               | + \$0.00          | + \$0.00  |

\$2,064.92

\$0.00

4. Calculate gross income. Add line 2 + line 3.

## Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 34 of 70

| Debtor                  |  | ed-Jackson<br>st Name | Case numbe               | er <i>(if</i>                     |                         |
|-------------------------|--|-----------------------|--------------------------|-----------------------------------|-------------------------|
|                         | First Name Middle Name Las   | st name               | For Debtor 1             | For Debtor 2 or non-filing spouse |                         |
| Сору                    | line 4 here  | <b>→</b> 4.           | \$2,064.92               | \$0.00                            |                         |
| 5. List a               | all payroll deductions:  |                       |                          |                                   |                         |
| 5a. <b>T</b>            | ax, Medicare, and Social Security deductions   | 5a.                   | \$448.41                 | \$0.00                            |                         |
| 5b. <b>N</b>            | Mandatory contributions for retirement plans   | 5b.                   | \$0.00                   | \$0.00                            |                         |
| 5c. <b>V</b>            | oluntary contributions for retirement plans  | 5c.                   | \$0.00                   | \$0.00                            |                         |
| 5d. <b>F</b>            | Required repayments of retirement fund loans   | 5d.                   | \$0.00                   | \$0.00                            |                         |
| 5e. <b>l</b> ı          | nsurance   | 5e.                   | \$29.94                  | \$0.00                            |                         |
| 5f. <b>D</b>            | omestic support obligations  | 5f                    | \$0.00                   | \$0.00                            |                         |
| 5g. <b>l</b>            | Jnion dues   | 5g                    | \$0.00                   | \$0.00                            |                         |
| 5h. <b>C</b>            | Other deductions. Specify:   | 5h. + _               | \$0.00 +                 | \$0.00                            |                         |
| 6. <b>Add t</b><br>+5h. | the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f +   | · 5g 6                | \$478.36                 | \$0.00                            |                         |
| 7. Calcu                | ulate total monthly take-home pay. Subtract line 6 from line 4   | . 7                   | \$1,586.56               | \$0.00                            |                         |
| 8. List a               | all other income regularly received:   |                       |                          |                                   |                         |
| b                       | let income from rental property and from operating a<br>usiness, profession, or farm   |                       |                          |                                   |                         |
| g                       | attach a statement for each property and business showing pross receipts, ordinary and necessary business expenses, and the total monthly net income.  | 8a.                   | \$0.00                   | \$0.00                            |                         |
| 8b. <b>I</b>            | nterest and dividends  | 8b.                   | \$0.00                   | \$0.00                            |                         |
|                         | amily support payments that you, a non-filing spouse, or a lependent regularly receive   | _                     |                          |                                   |                         |
|                         | nclude alimony, spousal support, child support, maintenance, livorce settlement, and property settlement.  | 8c                    | \$0.00                   | \$0.00                            |                         |
| 8d. <b>l</b>            | Jnemployment compensation  | 8d                    | \$0.00                   | \$0.00                            |                         |
| 8e. <b>S</b>            | ocial Security   | 8e                    | \$0.00                   | \$0.00                            |                         |
| Ir<br>ca<br>u<br>h      | ther government assistance that you regularly receive actude cash assistance and the value (if known) of any non-ash assistance that you receive, such as food stamps (benefits ander the Supplemental Nutrition Assistance Program) or ousing subsidies pecify:   | 8f.                   | \$0.00                   | \$0.00                            |                         |
| 8a. <b>F</b>            | Pension or retirement income   | 8g.                   | \$0.00                   | \$0.00                            |                         |
|                         | Other monthly income. Specify:   | 8h. +                 | \$0.00 +                 |                                   |                         |
| 9. <b>Add</b> a         | all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8   | Bh. 9.                | \$0.00                   | \$0.00                            |                         |
|                         | ulate monthly income. Add line 7 + line 9.<br>the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spor  | 10                    | \$1,586.56               | \$0.00 =                          | \$1,586.56              |
| Inclu<br>friend         | te all other regular contributions to the expenses that you lide contributions from an unmarried partner, members of your holds or relatives.  Ot include any amounts already included in lines 2-10 or amounts.   | ousehold, your d      | ependents, your roomr    |                                   |                         |
| Spec                    | ify:   |                       |                          | 11. +                             | \$0.00                  |
|                         | the amount in the last column of line 10 to the amount in I that amount on the Summary of Schedules and Statistical Schedule |                       |                          |                                   | \$1,586.56              |
| vviite                  | unat amount on the <i>ournmary of Scriedules and Statistical Sunn</i>  | mary or oerlant L     | aviiilies aru neidleu Di | a.a, 11 It applies                | Combined monthly income |
|                         | you expect an increase or decrease within the year after yo No.  Yes. Explain:   | u file this form?     |                          |                                   |                         |
|                         |  |                       |                          |                                   |                         |

|  | Case 16-                            | -39102 Do                        |                            | .2/12/16    Entered 1<br>iment     Page 35 of                    | 2/12/16 15:31:24<br>70             | Desc Main  |
|--|-------------------------------------|----------------------------------|----------------------------|--|------------------------------------|--|
| Fill in this infor                                   | mation to identify                  | your case:                       |                            |  |                                    |  |
| Debtor 1  Debtor 2 (Spouse, if filing)               | Lafrance First Name Neva First Name |                                  | liddle Name                | Reed-Jackson  Last Name  Reed-Jackson  Last Name                 | Check if this is:                  | 3  |
|  | ankruptcy Court f                   | or the: Northern                 |                            | District of Illinois (State)                                     | A supplement sho expenses as of th | owing post-petition chapter 13 e following date: |
| Case number (If known)                               |                                     |                                  |                            |  | MM / DD / YYYY                     |  |
| Be as complete<br>information. If<br>(if known). Ans | e and accurate a                    | eded, attach and<br>on.          | married people a           | re filing together, both are eq<br>form. On the top of any addit |                                    |  |
| 1. Is this a join                                    | nt case? to line 2                  |                                  |                            |  |                                    |  |
|  | oes Debtor 2 live                   | in a separate ho                 | usehold?                   |  |                                    |  |
|  |                                     | must file Official Fo            | rms 106J-2, <i>Expen</i>   | ses for Separate Household of L                                  | Debtor 2.                          |  |
| 2. Do you have                                       | e dependents?                       | <b>✓</b> No                      |                            |  |                                    |  |
| Do not list D<br>Debtor 2.                           | ebtor 1 and                         | Yes. Fill out the each dependent | nis information for<br>ent | Dependent's relationship to<br>Debtor 1 or Debtor 2              | Dependent's age                    | Does dependent live with you?                    |

#### Part 2: **Estimate Your Ongoing Monthly Expenses**

**✓** No

Yes

3. Do your expenses include

yourself and your dependents?

expenses of people other

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106I.)

| 4. The rental or home ownership expenses for your residence. Include first mortgage payments and |     | \$450.00 |
|--|-----|----------|
| any rent for the ground or lot. 4.   | 4.  |          |
| If not included in line 4:   |     |          |
| 4a. Real estate taxes  | 4a  | \$0.00   |
| 4b. Property, homeowner's, or renter's insurance   | 4b. | \$0.00   |
| 4c. Home maintenance, repair, and upkeep expenses  | 4c. | \$0.00   |
| 4d. Homeowner's association or condominium dues  | 4d. | \$0.00   |

Your expenses

## Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 36 of 70

Debtor 1 Lafrance Reed-Jackson Case number (if known)
First Name Middle Name Last Name

| First Name   | Middle Name Las                           | st Name                               |     |               |
|--|---|---------------------------------------|-----|---------------|
|  |   |                                       |     | Your expenses |
| 5. Additional mortgage payme                                     | ents for your residence, such as home     | equity loans                          | 5.  | \$0.00        |
| 6. Utilities:  |   |                                       |     |               |
| 6a. Electricity, heat, natural g                                 | as  |                                       | 6a. | \$0.00        |
| 6b. Water, sewer, garbage co                                     | ollection                                 |                                       | 6b. | \$0.00        |
| 6c. Telephone, cell phone, Ir                                    | nternet, satellite, and cable services    |                                       | 6c. | \$261.00      |
| 6d. Other. Specify:  |   |                                       | 6d  | \$0.00        |
| 7. Food and housekeeping su                                      | pplies                                    |                                       | 7.  | \$400.00      |
| 8. Childcare and children's ed                                   | ducation costs                            |                                       | 8.  | \$0.00        |
| 9. Clothing, laundry, and dry o                                  | cleaning                                  |                                       | 9.  | \$75.00       |
| 10. Personal care products as                                    | nd services                               |                                       | 10. | \$75.00       |
| 11. Medical and dental expen                                     | ses                                       |                                       | 11. | \$0.00        |
| 12. <b>Transportation.</b> Include ga Do not include car payment | s, maintenance, bus or train fare.        |                                       | 12. | \$150.00      |
| 13. Entertainment, clubs, rec                                    | reation, newspapers, magazines, and       | books                                 | 13. | \$0.00        |
| 14. Charitable contributions a                                   | and religious donations                   |                                       | 14. | \$0.00        |
| 15. <b>Insurance.</b> Do not include insurance dec               | ducted from your pay or included in lines | s 4 or 20.                            |     |               |
| 15a. Life insurance  |   |                                       | 15a | \$0.00        |
| 15b. Health insurance  |   |                                       | 15b | \$0.00        |
| 15c. Vehicle insurance   |   |                                       | 15c | \$0.00        |
| 15d. Other insurance. Specif                                     | y:  |                                       | 15d | \$0.00        |
| 16. Taxes. Do not include taxes                                  | deducted from your pay or included in     | lines 4 or 20.                        |     |               |
| Specify:   |   |                                       | 16  | \$0.00        |
| 17. Installment or lease paym                                    | ents:                                     |                                       | 10  |               |
| 17a. Car payments for Vehic                                      |   |                                       | 17a | \$0.00        |
| 17b. Car payments for Vehic                                      | le 2                                      |                                       | 17b | \$0.00        |
| 17c. Other. Specify:   |   |                                       | 17c | \$0.00        |
| 17d. Other. Specify:   |   |                                       | 17d | \$0.00        |
|  | , maintenance, and support that you       | •                                     |     | \$0.00        |
|  | ule I, Your Income (Official Form 106     |                                       | 18. |               |
|  | to support others who do not live wi      | th you.                               |     |               |
| Specify:   |   | forms on an Cabadula I. Varia la como | 19. | \$0.00        |
| 20a. Mortgages on other pro                                      |   | form or on Schedule I: Your Income.   | 200 | <b>\$0.00</b> |
| 20b. Real estate taxes.  | porty                                     |                                       | 20a | \$0.00        |
| 20c. Property, homeowner's                                       | or renter's insurance                     |                                       | 20b | \$0.00        |
| 20d. Maintenance, repair, an                                     |   |                                       | 20c | \$0.00        |
| 20e. Homeowner's association                                     |   |                                       | 20d | \$0.00        |
| 206. HOMEOWITELS ASSOCIATION                                     | on or condominant dues                    |                                       | 20e | \$0.00        |

Official Form 106J Schedule J: Your Expenses page 2

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 37 of 70

| Debtor 1        |               |                      |                          | Reed-Jackson   | Case number (if known) |     |             |
|-----------------|---------------|----------------------|--------------------------|--|------------------------|-----|-------------|
|                 | First Name    |                      | Middle Name              | Last Name  |                        |     |             |
| 21. <b>Othe</b> | r. Specify:   |                      |                          |  |                        | 21  | \$0.00      |
| 00 <b>Colo</b>  |               | monthly expenses     | _                        |  |                        |     |             |
|                 | •             |                      | \$1,411.00               |  |                        |     |             |
|                 |               | through 21.          |                          |  |                        |     | \$0.00      |
|                 |               | ` .                  | ,,                       | from Official Form 106J-2  |                        |     | \$1,411.00  |
| 22c. /          | Add line 22a  | a and 22b. The resu  | ult is your monthly expe | enses.   |                        | 22. |             |
| 23.Calcu        | ılate your r  | nonthly net incon    | ne.                      |  |                        |     |             |
| 23a. (          | Copy line 12  | 2 (your combined n   | nonthly income) from S   | Schedule I.  |                        | 23a | \$1,586.56  |
| 23b.            | Copy your r   | nonthly expenses f   | rom line 22 above.       |  |                        | 23b | \$1,411.00  |
|                 | ,             | , ,                  | es from your monthly in  | come.  |                        |     | \$175.56    |
|                 | The result is | your monthly net     | income.                  |  |                        | 23c | <del></del> |
| nom             | gage payme    | ent to increase or d |                          | oan within the year or do you nodification to the terms of your of the terms of your officers. |                        |     |             |
|                 |               |                      |                          |  |                        |     |             |
|                 |               |                      |                          |  |                        |     |             |

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 38 of 70

| Fill in this infor                      | mation to identify your ca | ase:         |                              |  |
|---|----------------------------|--------------|------------------------------|--|
| Debtor 1                                | Lafrance                   | Reed-Jackson |                              |  |
|   | First Name                 | Middle Name  | Last Name                    |  |
| Debtor 2                                | Neva                       |              | Reed-Jackson                 |  |
| (Spouse, if filing)                     | First Name                 | Middle Name  | Last Name                    |  |
| United States Bankruptcy Court for the: |                            | Northern     | District of Illinois (State) |  |
| Case number                             |                            |              |                              |  |

### Official Form 106Dec

### Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below  |   |  |  |  |  |  |  |  |
|-----|--|---|--|--|--|--|--|--|--|
|     | Did you pay or agree to pay someone who is NOT an attorney to h                                  | elp you fill out bankruptcy forms?  |  |  |  |  |  |  |  |
|     | ✓ No   |   |  |  |  |  |  |  |  |
|     | Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |  |  |  |  |  |  |
|     |  |   |  |  |  |  |  |  |  |
|     |  |   |  |  |  |  |  |  |  |
|     | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | nd schedules filed with this declaration and  |  |  |  |  |  |  |  |
| x   | ·  | ✗ /s/ Neva Reed-Jackson   |  |  |  |  |  |  |  |
| ••  | Signature of Debtor 1  | Signature of Debtor 2   |  |  |  |  |  |  |  |
|     | Date 12/12/2016  | Date 12/12/2016   |  |  |  |  |  |  |  |
|     | MM/DD/YYYY   | MM/DD/YYYY  |  |  |  |  |  |  |  |

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 39 of 70

| Fill in this infor                               | mation to identify your o | ase:                         |  |                   |
|--|---------------------------|------------------------------|--|-------------------|
| Debtor 1   | Lafrance                  |                              | Reed-Jackson   |                   |
|  | First Name                | Middle Name                  | Last Name  | Check if this is: |
| Debtor 2   | Neva                      |                              | Reed-Jackson   |                   |
| (Spouse, if filing)                              | First Name                | Middle Name                  | Last Name  | An amended filing |
| United States Bankruptcy Court for the: Northern |                           | District of Illinois (State) | A supplement showing post-petition chapter 13 expenses as of the following date: |                   |
| Case number<br>(If known)                        |                           |                              | . ,  | MM / DD / YYYY    |

### Official Form 106J-2

### Schedule J-2: Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J. Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Describe Your Household                     |
|---|
| 1.Do you and Debtor 1 maintain separate households? |
| No. Do not complete this form.                      |
| Yes.  |

Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 40 of 70

| -III in this intor   |   |   |  |   |                   |  |
|----------------------|---|---|--|---|-------------------|--|
|                      | mation to identify your                           | case:   |  |   |                   |  |
| Debtor 1             | Lafrance  |   | Reed-Jac   | kson  |                   |  |
|                      | First Name  | Middle Nam  | ne Last Nam  | е   |                   |  |
| Debtor 2             | Neva  |   | Reed-Jac   |   |                   |  |
| Spouse, if filing)   | First Name  | Middle Nam  | ne Last Nam  | е   |                   |  |
| Inited States F      | Bankruptcy Court for the:                         | : Northern  | District of Illino   |   |                   |  |
| ase number<br>known) |   |   | (Giai  | <del></del>   |                   |  |
| Official             | Form 107  |   |  |   |                   | Check if this is amended filing                                      |
| e as comple          | ete and accurate as po                            | ossible. If two marri<br>led, attach a separa   | ied people are filing  | Filing for Bankru<br>together, both are equally<br>On the top of any addition | responsible for s |  |
|                      | e Details About Your                              |   | nd Where You Lived   | Before  |                   |  |
|                      |   | -   |  |   |                   |  |
| <b>✓</b> Ma          | rried   |   |  |   |                   |  |
| Not                  | t married   |   |  |   |                   |  |
| _                    |   |   |  |   |                   |  |
| . During t           | the last 3 years, have y                          | ou lived anywhere ot  | ther than where you liv                                      |   |                   |  |
|                      |   |   | anor andir whore you in                                      | e now?  |                   |  |
|                      |   |   | mor man whore you m  | e now?  |                   |  |
| <b>✓</b> No          |   |   | anor andir anioro you m                                      | e now?  |                   |  |
|                      | s. List all of the places y                       | ou lived in the last 3 y  |  |   |                   |  |
|                      |   | ou lived in the last 3  |  |   |                   |  |
| Yes                  |   |   |  |   |                   | Dates Debtor 2 lived there   |
| Yes                  | s. List all of the places y                       |   | years. Do not include v<br>Dates Debtor 1 lived              | vhere you live now.   |                   |  |
| Yes                  | s. List all of the places y                       | 1   | years. Do not include v<br>Dates Debtor 1 lived<br>there     | Debtor 2:  Same as Debtor 1   |                   | there Same as Debtor 1   |
| Yes                  | s. List all of the places y                       | 1   | years. Do not include v  Dates Debtor 1 lived there          | where you live now.  Debtor 2:  |                   | there Same as Debtor 1 From  |
| Yes                  | s. List all of the places y                       | 1   | years. Do not include v<br>Dates Debtor 1 lived<br>there     | Debtor 2:  Same as Debtor 1   |                   | there Same as Debtor 1   |
| Yes                  | s. List all of the places y                       | 1   | years. Do not include v  Dates Debtor 1 lived there          | Debtor 2:  Same as Debtor 1   |                   | there Same as Debtor 1 From  |
| Yes Det              | s. List all of the places y  btor 1:  mber Street | 1   | years. Do not include v  Dates Debtor 1 lived there          | Debtor 2:  Same as Debtor 1  Number Street                                    | Zip Code          | there Same as Debtor 1 From  |
| Pet Det              | s. List all of the places y  btor 1:  mber Street | · · · · · · · · · · · · · · · · · · ·   | years. Do not include v  Dates Debtor 1 lived there          | Debtor 2:  Same as Debtor 1  Number Street  City State                        | Zip Code          | there  Same as Debtor 1  From To                                     |
| Del                  | s. List all of the places y  btor 1:  mber Street | · · · · · · · · · · · · · · · · · · ·   | years. Do not include v  Dates Debtor 1 lived there          | Debtor 2:  Same as Debtor 1  Number Street                                    | Zip Code          | there Same as Debtor 1 From  |
| Del                  | s. List all of the places y  btor 1:  mber Street | I to the state of | years. Do not include v  Dates Debtor 1 lived there  From To | Debtor 2:  Same as Debtor 1  Number Street  City State                        | Zip Code          | there  Same as Debtor 1  From To                                     |
| Pet Nur City         | s. List all of the places y  btor 1:  mber Street | I to the state of | years. Do not include v  Dates Debtor 1 lived there          | Debtor 2:  Same as Debtor 1  Number Street  City State                        | Zip Code          | there  Same as Debtor 1  From To                                     |
| Pet Nur City         | btor 1:  mber Street  y State                     | Zip Code  | years. Do not include v  Dates Debtor 1 lived there  From To | Debtor 2:  Same as Debtor 1  Number Street  City State  Same as Debtor 1      | Zip Code          | there  Same as Debtor 1  From To  Same as Debtor 1                   |
| Pet Nur City         | btor 1:  mber Street  y State                     | Zip Code  | years. Do not include v  Dates Debtor 1 lived there  From    | Debtor 2:  Same as Debtor 1  Number Street  City State  Same as Debtor 1      | Zip Code          | there  Same as Debtor 1  From To  Same as Debtor 1  From From To  To |
| Det Nur City         | btor 1:  mber Street  / State                     | Zip Code  | years. Do not include v  Dates Debtor 1 lived there  From    | Debtor 2:  Same as Debtor 1  Number Street  City State  Same as Debtor 1      | Zip Code          | there  Same as Debtor 1  From To  Same as Debtor 1  From From To  To |

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 41 of 70

Debtor 1 Lafrance Reed-Jackson Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$15000.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$13000.00 Wages, For last calendar year: commissions, commissions, 2015 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$20000.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2014) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2015 For the calendar year before that: (January 1 to December 31, 2014

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 42 of 70

Reed-Jackson Debtor 1 Lafrance Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car

Number Street

State

Zip Code

City

Credit card

Loan repayment

Suppliers or vendors
Other

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 43 of 70

|   | Latrance                                |   |   |  | ed-Jackson                                  | Case number                                  | (if known)   |
|---|---|---|---|--|---|--|--|
|   | First Name                              |   | Middle Name   | Las                                    | t Name                                      |  |  |
| i | ders include your<br>porations of which | relatives; a<br>you are a<br>or a busin | ny general partner<br>n officer, director,<br>ess you operate a | s; relatives of any person in control, | general partners; par<br>or owner of 20% or | tnerships of which y<br>more of their voting | who was an insider?  You are a general partner;  g securities; and any managing  Y domestic support obligations, |
| 1 | No                                      |   |   |  |   |  |  |
| i | Yes. List all pay                       | nents to a                              | an insider.   |  |   |  |  |
|   |   |   |   | Dates of                               | Total amount                                | Amount you                                   | Reason for this payment  |
|   |   |   |   | payment                                | paid  | still owe                                    |  |
|   | Insider's Name                          |   |   | -                                      |   |  |  |
|   | Number Street                           |   |   |  |   |  |  |
|   |   |   |   |  |   |  |  |
|   | City                                    | State                                   | Zip Code  |  |   |  |  |
|   | Incidarla Nama                          |   |   |  |   |  |  |
|   | Insider's Name                          |   |   |  |   |  |  |
|   | Number Street                           |   |   |  |   |  |  |
|   |   |   |   |  |   |  |  |
|   | City                                    | State                                   | Zip Code  |  |   |  |  |
|   | No                                      | -                                       | ranteed or cosigne<br>t benefited an ins                        | ·                                      | Total amount paid                           | Amount you still owe                         | Reason for this payment  Include creditor's name   |
|   | Insider's Name                          |   |   |  |   |  |  |
|   |   |   |   |  |   |  |  |
|   | Number Street                           |   |   |  |   |  |  |
|   | City                                    | State                                   | Zip Code  |  |   |  |  |
|   |   |   |   |  |   |  |  |
|   | Insider's Name                          |   | _   |  |   |  |  |
|   | Number Street                           |   |   |  |   |  |  |
|   |   |   |   |  |   |  |  |
|   | Citv                                    | State                                   | Zip Code  |  |   |  |  |

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 44 of 70

Debtor 1 Lafrance Reed-Jackson Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed.

City

State

Zip Code

Property was garnished.

Property was attached, seized, or levied.

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 45 of 70

| Debt | tor 1 Lafrance  |                   | Reed-Jackson            | Case number (if known       | )                        |                    |
|------|---|-------------------|-------------------------|-----------------------------|--------------------------|--------------------|
|      | First Name Middle Na  | me                | Last Name               |                             |                          |                    |
| 11.  | Within 90 days before you filed for bankru accounts or refuse to make a payment be      |                   |                         | k or financial institution, | set off any amou         | nts from your      |
|      | ✓ No ☐ Yes. Fill in the details.  |                   |                         |                             |                          |                    |
|      | _   | Des               | cribe the action the c  | reditor took                | Date action was taken    | Amount             |
|      | Creditor's Name   |                   |                         |                             |                          |                    |
|      | Number Street   |                   |                         |                             |                          |                    |
|      |   | Last              | 4 digits of account nu  | mber: XXXX-                 |                          |                    |
|      | City State Zip Co   | ode               |                         |                             |                          |                    |
| 12.  | Within 1 year before you filed for bankrupt appointed receiver, a custodian, or another |                   | our property in the po  | ssession of an assignee fo  | or the benefit of c      | reditors, a court- |
|      | ✓ No ☐ Yes  |                   |                         |                             |                          |                    |
| Part | t 5: List Certain Gifts and Contribution  | าร                |                         |                             |                          |                    |
| 13.  | Within 2 years before you filed for bankru  | ptcy, did you giv | e any gifts with a tota | al value of more than \$600 | 0 per person?            |                    |
|      | ✓ No  Yes. Fill in the details for each gift.   |                   |                         |                             |                          |                    |
|      | Gifts with a total value of more than sper person                                       | 5600 Des          | cribe the gifts         |                             | Dates you gave the gifts | Value              |
|      |   |                   |                         |                             |                          |                    |
|      | Person to Whom You Gave the Gift  |                   |                         |                             |                          |                    |
|      | Number Street   |                   |                         |                             |                          |                    |
|      | City State Zip Co   | ode               |                         |                             |                          |                    |
|      | Person's relationship to you  |                   |                         |                             |                          |                    |
|      | Person to Whom You Gave the Gift  |                   |                         |                             |                          |                    |
|      | Number Street   |                   |                         |                             |                          |                    |
|      | City State Zip Co   | ode               |                         |                             |                          |                    |
|      | Person's relationship to you  |                   |                         |                             |                          |                    |

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 46 of 70

| Debtor 1 | Lafrance  | Reed-Jackson Cas                         | se number (if known)               |                    |
|----------|---|--|------------------------------------|--------------------|
|          | First Name Middle Name  | Last Name                                |                                    |                    |
| 44 145   |   |  | .h - 4-4-1                         |                    |
| 14. Wi   | thin 2 years before you filed for bankruptcy, did             | you give any gifts or contributions wit  | n a total value of more than \$600 | to any charity?    |
| ✓        | No  |  |                                    |                    |
|          | Yes. Fill in the details for each gift or contributi          | on.                                      |                                    |                    |
|          | Gifts or contributions to charities                           | Describe what you contributed            | Date you                           | Value              |
|          | that total more than \$600                                    | ·  | contributed                        |                    |
|          |   |  |                                    |                    |
|          | Charity's Name  | -  |                                    |                    |
|          | ,   |  |                                    |                    |
|          |   |  |                                    |                    |
|          | Number Street   | -  |                                    |                    |
|          |   | _  |                                    |                    |
|          | City State Zip Code   |  |                                    |                    |
| Part 6:  | List Certain Losses   |  |                                    |                    |
| art o.   | List oci talli Losses   |  |                                    |                    |
| 4.5 14.5 |   |  |                                    |                    |
|          | thin 1 year before you filed for bankruptcy or sir<br>mbling? | nce you filed for bankruptcy, did you lo | se anything because of them, fire, | other disaster, or |
| _        |   |  |                                    |                    |
| ✓        | No  |  |                                    |                    |
|          | Yes. Fill in the details.                                     |  |                                    |                    |
|          | Describe the property you lost and                            | Describe any insurance coverage          | for the loss Date of your          | Value of property  |
|          | how the loss occurred   | Include the amount that insurance h      |                                    | lost               |
|          |   | pending insurance claims on line 33      | of Schedule                        |                    |
|          |   | A/B: Property.                           |                                    |                    |
|          |   |  |                                    |                    |
| Part 7:  | List Certain Payments or Transfers                            |  |                                    |                    |
|          | No  |  |                                    |                    |
| ✓        | Yes. Fill in the details.                                     |  |                                    |                    |
|          |   | Description and value of any prope       |                                    | Amount of          |
|          |   | transferred                              | or transfer                        | payment            |
|          | 0 11 5  |  | was made                           | 4000.00            |
|          | Semrad Law Firm Person Who Was Paid                           | Attorney's Fee - 260.00                  | 12/12/2016                         | \$260.00           |
|          | 11101 S. Western Avenue                                       |  |                                    |                    |
|          | Number Street   | •  |                                    |                    |
|          |   |  |                                    |                    |
|          | -   |  |                                    |                    |
|          | Chicago Illinois 60643  |  |                                    |                    |
|          | City State Zip Code   |  |                                    |                    |
|          | Email or website address                                      | •  |                                    |                    |
|          |   |  |                                    |                    |
|          | Person Who Made the Payment, if Not You                       |  |                                    |                    |
|          |   |  |                                    |                    |
|          | Person Who Was Paid   |  |                                    |                    |
|          | Number Ctreet   |  |                                    |                    |
|          | Number Street   |  |                                    |                    |
|          | <del></del>   | •  |                                    |                    |
|          | 00.   |  |                                    |                    |
|          | City State Zip Code   |  |                                    |                    |
|          | Email or website address                                      | •  |                                    |                    |
|          |   |  |                                    |                    |
|          | Person Who Made the Payment, if Not You                       |  |                                    |                    |

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 47 of 70

| Debto |                            | Latrance  |                      | Reed-Jackson                                    | Case number (if kno       | vn)  |                              |
|-------|----------------------------|---|----------------------|---|---------------------------|--|------------------------------|
|       |                            | First Name  | Middle Name          | Last Name                                       |                           |  |                              |
| ı     | nelp                       | nin 1 year before you filed<br>you deal with your credi<br>not include any payment or | tors or to make paym |   | our behalf pay or transf  | er any property to a                         | anyone who promised to       |
| ļ     | <u>~</u>                   | No<br>Yes. Fill in the details.   |                      |   |                           |  |                              |
|       | _                          | roo. I iii ii i u lo dottallo.  |                      | Description and value of a                      | ny property               | Date   | Amount of payment            |
|       |                            |   |                      | transferred                                     | пу ргорегту               | payment or<br>transfer was<br>made           | Amount of payment            |
|       |                            | Person Who Was Paid   |                      |   |                           |  |                              |
|       |                            | Number Street   |                      | -   |                           |  |                              |
|       |                            | City. State   | 7in Codo             | •   |                           |  |                              |
|       |                            | City State  | Zip Code             |   |                           |  |                              |
|       |                            | transfers that you have alrest No Yes. Fill in the details.                           |                      | security (such as the granting of a nent.       | recently interest of more | gage on your proper                          | ty). Do not include girls    |
|       |                            |   |                      | Description and value of a property transferred |                           | nny property or<br>received or debts p<br>ge | Date transfer was made       |
|       |                            | Person Who Received Trans   | nsfer                |   |                           |  |                              |
|       |                            | Number Street   |                      |   |                           |  |                              |
|       |                            | City State Person's relationship to yo  | Zip Code<br>ou       |   |                           |  |                              |
|       |                            | Person Who Received Tran  | nsfer                |   |                           |  |                              |
|       |                            | Number Street   |                      |   |                           |  |                              |
|       |                            | City State<br>Person's relationship to yo   | Zip Code<br>ou       |   |                           |  |                              |
| ı     | oen                        | nin 10 years before you fil<br>eficiary?<br>ese are often called asset-pro            |                      | d you transfer any property to a                | a self-settled trust or s | milar device of wh                           | ich you are a                |
|       | $\stackrel{\mathbf{*}}{=}$ | Yes. Fill in the details.   |                      |   |                           |  |                              |
|       |                            |   |                      | Description and value of                        | the property transferre   | d  | Date<br>transfer was<br>made |
|       |                            | Name of trust   |                      |   |                           |  |                              |

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 48 of 70

Debtor 1 Lafrance Reed-Jackson Case number (if known)
First Name Middle Name Last Name

| . Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
|   |  |  |  |  |  |  |  |
| Date<br>account was<br>closed, sold,<br>moved, or<br>transferred  | Last balance<br>before<br>closing or<br>transfer                 |  |  |  |  |  |  |
| 12/1/2015   | \$ 0.00  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| 12/1/2015   | \$ 0.00  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| sitory for secur  | ities, casii, oi   |  |  |  |  |  |  |
| s   | Do you still have it?  |  |  |  |  |  |  |
| s   | -  |  |  |  |  |  |  |
| S   | have it?   |  |  |  |  |  |  |
| s   | have it?   |  |  |  |  |  |  |
| s   | have it?   |  |  |  |  |  |  |
| s<br>ptcy?  | have it?   |  |  |  |  |  |  |
|   | have it?   |  |  |  |  |  |  |
|   | have it?   |  |  |  |  |  |  |
| ptcy?   | have it?  No Yes  Do you still                                   |  |  |  |  |  |  |
| ptcy?   | No Yes  Do you still have it?                                    |  |  |  |  |  |  |
| ptcy?   | No Yes  Do you still have it?                                    |  |  |  |  |  |  |
|   | Date<br>account was<br>closed, sold,<br>moved, or<br>transferred |  |  |  |  |  |  |

### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 49 of 70

Reed-Jackson Debtor 1 Lafrance Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 50 of 70

| Debt |      | Lafrance<br>First Name                                   |   | liddle News  | Reed-Jackson  | Case              | number <i>(if</i> | known)  |                    |  |
|------|------|--|---|--|---|-------------------|-------------------|---|--------------------|--|
|      |      | FIRST Name   | IV  | liddle Name  | Last Name   |                   |                   |   |                    |  |
| 26.  |      |  | / in any judicia  | al or administra                                       | tive proceeding under   | any environment   | tal law? In       | clude settlements and ord                           | ers.               |  |
|      |      | No<br>Yes. Fill in the det                               | ails.   |  |   |                   |                   |   |                    |  |
|      |      |  |   | C  | Court or agency   |                   | Nature o          | of the case   | Status of the case |  |
|      |      | Case title   |   |  | Court Name  |                   |                   |   | Pending            |  |
|      |      | Case number  |   | <u>-</u>   | lumberStreet  |                   |                   |   | On appeal          |  |
|      |      |  |   | ō  | City State  | Zip Code          |                   |   | Concluded          |  |
| Part | 11:  | Give Details Ab  | out Your Bu   | siness or Cor  | nnections to Any Bu   | siness            |                   |   |                    |  |
| 27.  | With | nin 4 years before                                       | you filed for b   | ankruptcy, did   | you own a business or   | have any of the f | ollowing c        | onnections to any busines                           | s?                 |  |
|      | _    | A member of A partner in a An officer, dir An owner of a | a limited liabil<br>a partnership<br>rector, or man<br>at least 5% of | ity company (LL<br>aging executive<br>the voting or ec | de, profession, or other<br>.C) or limited liability pa<br>e of a corporation<br>juity securities of a corp | rtnership (LLP)   | ıll-time or p     | part-time   |                    |  |
|      |      | No. None of the a<br>Yes. Check all that                 |   |  | letails below for each b  | ousiness.         |                   |   |                    |  |
|      | ¥    |  |   |  | Describe the natu   |                   | ss                | Employer Identification r                           |                    |  |
|      |      | Reed-Jackson, La<br>Business Name<br>7649 S. Abderdee    |   | nent   | _ UBER  |                   |                   | EIN:xx-xxx  |                    |  |
|      |      | Number Street Chicago                                    | Illinois  | 60620  | Name of accountant or bookkeeper  |                   | er                | Dates business existed                              |                    |  |
|      |      | City   | State   | Zip Code   | -   |                   |                   | From To   |                    |  |
|      |      |  |   |  | Describe the natu   | re of the busines | SS                | Employer Identification r                           |                    |  |
|      |      | Business Name  |   |  | -   |                   |                   | EIN:  |                    |  |
|      |      | Number Street  |   |  | - Name of accounta  | ant or bookkeepe  | er                | Dates business existed                              |                    |  |
|      |      | City   | State   | Zip Code   | -   |                   |                   | From To   |                    |  |
|      |      |  |   |  | Describe the natu   | re of the busines | ss                | Employer Identification r include Social Security r |                    |  |
|      |      | Business Name  |   |  | -   |                   |                   | EIN:  |                    |  |
|      |      | Number Street  |   |  | - Name of accounta  | ant or bookkeepe  | er                | Dates business existed                              |                    |  |
|      |      | City   | State   | Zip Code   | -   | •                 |                   | From To   |                    |  |
|      |      |  |   |  |   |                   |                   |   |                    |  |

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 51 of 70

| Deb  | tor 1          | Lafrance  |                 |                       | Reed-Jackson                   | Case number (if known)  |
|------|----------------|---|-----------------|-----------------------|--------------------------------|---|
|      | Ì              | First Name  |                 | Middle Name           | Last Name                      |   |
| 28.  | crec           | nin 2 years befor<br>litors, or other p<br>No<br>Yes. Fill in the c | parties.        | r bankruptcy, did yo  | u give a financial statement   | to anyone about your business? Include all financial institutions,  |
|      |                |   |                 |                       | Date issued                    |   |
|      |                |   |                 |                       | Dato locada                    |   |
|      |                | Name  |                 |                       | MM/DD/YYYY                     |   |
|      |                |   |                 |                       |                                |   |
|      |                | Number Stree  | t               |                       |                                |   |
|      |                |   |                 |                       |                                |   |
|      |                | City  | State           | Zip Code              |                                |   |
| Part | 12:            | Sign Below  |                 |                       |                                |   |
|      |                | kruptcy case ca   |                 | es up to \$250,000, c | or imprisonment for up to 20   | years, or obtaining money or property by fraud in connection with years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|      |                |   | ature of Debto  |                       | <del></del>                    | Signature of Debtor 2   |
|      |                | Olg. i  | iataro or Bobio |                       |                                | oignature of Bostor E   |
|      |                | Date  | 12/12/2016      |                       |                                | Date 12/12/2016   |
|      | Did vo         | u attach additi   | onal nages to   | Vour Statement of I   | inancial Affairs for Individus | als Filing for Bankruptcy (Official Form 107)?  |
|      |                |   | onai pages to   | Tour Statement of I   | mancial Analis for marviduo    | als I ming for Bankruptcy (Official Form 107):  |
|      | ✓ N            | 0   |                 |                       |                                |   |
|      | Y              | es  |                 |                       |                                |   |
| ı    | Did yo         | ou pay or agree   | to pay someo    | ne who is not an att  | orney to help you fill out bar | nkruptcy forms?   |
| r    | N              |   |                 |                       |                                |   |
| !    | _              |   |                 |                       |                                | Attack the Continuates Oction Oversuals Nation  |
| l    | ∐ <sup>Y</sup> | es. Name of pers  | son             |                       |                                | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).                      |

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 52 of 70

| Debtor 1 Lafrance  |   | Reed-Jackson Case number (if known) |                                 |                               |  |  |
|--|---|-------------------------------------|---------------------------------|-------------------------------|--|--|
|  | First Name                                | Middle Name                         | Last Name                       |                               |  |  |
|  | Additional Page                           |                                     |                                 |                               |  |  |
| 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, solo or transferred? |   |                                     |                                 |                               |  | sed, sold, moved,                                |
|  |   |                                     | Last 4 digits of account number | Type of account or instrument | Date<br>account was<br>closed, sold,<br>moved, or<br>transferred | Last balance<br>before<br>closing or<br>transfer |
|  | South Side Communi<br>Person Who Was Paid | ity Federal Credit Union            | XXXX-0000                       | ✓ Checking  ☐ Savings         | 12/1/2015  | \$ 0.00  |
|  | Number Street                             | _                                   |                                 | Money market                  |  |  |
|  | City Sta                                  | ate Zip Code                        |                                 | Brokerage Other               |  |  |

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 54 of 70

6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

#### Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 55 of 70

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to \$1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

  However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$401.52
- 3. Before signing this agreement, the attorney has received, \$260.00 toward the flat fee, leaving a balance due of \$3,740.00; and \$91.52 for expenses, leaving a balance due of \$4,141.52
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date:     | 12/12/2016              |                        |
|-----------|-------------------------|------------------------|
| Signed:   | , , ,                   |                        |
| /s/ Lafra | nce Reed-Jackson        |                        |
| /s/ Neva  | Reed-Jackson La Haffene | /s/ Ayah Abdelhadi     |
| Debtor(s) | Lass                    | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 58 of 70

B 203 (12/94)

### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

|      |   | Northern Distric                  | t of lillions  |                              |
|------|---|-----------------------------------|--|------------------------------|
| n re | Lafrance Reed-Jackson; Neva Re  | eed-Jackson                       | Case No.   |                              |
|      | Debtor  |                                   | Chapter  | (If known)  Chapter 13       |
|      |   |                                   | ·  | ·                            |
|      | DISCLOSURE OF   | COMPENSATIO                       | N OF ATTORNEY F  | OR DEBTOR                    |
| 1.   | . Pursuant to 11 U.S.C. § 329(a) and compensation paid to me within one rendered or to be rendered on behal | e year before the filing of the p | etition in bankruptcy, or agreed to  | be paid to me, for services  |
|      | For legal services, I have agreed to a  | ccept                             |  | \$4,000.00                   |
|      | Prior to the filing of this statement I   | have received                     |  | \$260.00                     |
|      | Balance Due   |                                   |  | \$3,740.00                   |
| 2    | . The source of the compensation pai  | d to me was:                      |  |                              |
|      | <b>✓</b> Debtor   | Other (specify)                   |  |                              |
| 3    | . The source of the compensation pai  | d to me is:                       |  |                              |
|      | <b>Debtor</b>   | Other (specify)                   |  |                              |
| 4    | . I have not agreed to share the a members and associates of my   |                                   | with any other person unless the   | y are                        |
|      |   | w firm. A copy of the agreeme     | h a other person or persons who a<br>nt, together with a list of the name  |                              |
| 5    | In return for the above-disclosed fee     a. Analysis of the debtor's fina bankruptcy;                      |                                   | service for all aspects of the bank<br>advice to the debtor in determining |                              |
|      | b. Preparation and filing of any  | petition, schedules, statemen     | its of affairs and plan which may b  | pe required;                 |
|      | c. Representation of the debto  | at the meeting of creditors ar    | nd confirmation hearing, and any a   | adjourned hearings thereof;  |
|      | d. Representation of the debto  | r in adversary proceedings and    | d other contested bankruptcy matt  | ters;                        |
| 6    | . By agreement with the debtor(s), the  | above-disclosed fee does no       | t include the following services:  |                              |
|      |   |                                   |  |                              |
|      |   | CERTIFICA                         | ATION  |                              |
|      | I certify that the foregoing is a completor(s) in this bankruptcy proceedings.                              | te statement of any agreemen      | t or arrangement for payment to n  | ne for representation of the |
|      | 12/12/2016  |                                   | /s/ Ayah Abdelhadi   |                              |
|      | Date  |                                   | Signature of Attorney  |                              |
|      |   |                                   | Semrad Law Firm  |                              |
|      |   |                                   | Name of law firm   |                              |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1,717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 63 of 70

### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

| n re: F       | Reed-Jackson, Lafrance ; Reed-Jackson, Neva      | Case No.                         |                                       |  |
|---------------|--|----------------------------------|---------------------------------------|--|
|               | Debtor(s)  | 0.000 .101                       |                                       |  |
|               |  | Chapter.                         | Chapter13                             |  |
|               | VERIFICATION                                     | TION OF CREDITOR MATRIX          |                                       |  |
| Th<br>owledge | ne above named Debtors hereby verify that the e. | attached list of creditors is t  | true and correct to the best of their |  |
| e:            | 12/12/2016                                       | /s/ Reed-Jackso                  | on, Lafrance                          |  |
|               |  | Reed-Jackson,<br>Signature of De |                                       |  |
|               |  |                                  |                                       |  |
|               |  | /s/ Reed-Jackso                  | on, Neva                              |  |

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 64 of 70

| Debtor 1 Lafrance<br>First Name   | Middle Name  | Reed-Jackson<br>Last Name  | Case number (if known)   |  |
|---|--|--|--|--|
| Part 6: Answer These Qu   | estions for Reporting Purpo  | oses   |  |  |
| 16. What kind of debts do<br>you have?  | "incurred by an individual No. Go to line 16b  ✓ Yes. Go to line 17  16b. Are your debts prima   | dual primarily for a perso.  .  Irily business debts? E or investment or throu   | onal, family, or househ<br>Business debts are debte<br>gh the operation of the   | s that you incurred to obtain<br>business or investment.   |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid the  | pter 7. Do you estimate th   | nat after any exempt prop<br>to distribute to unsecured  | erty is excluded and administrative<br>d creditors?  |
| 18. How many creditors<br>do you estimate that<br>you owe?  | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999  | 1,000-5,0<br>5,001-10<br>10,001-2  | ,000   | 25,001-50,000<br>50,001-100,000<br>More than 100,000   |
| 19. How much do you<br>estimate your assets<br>to be worth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$10,000,<br>\$50,000,   | 01-\$10 million<br>001-\$50 million<br>001-\$100 million<br>1,001-\$500 million  | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |
| <sup>20.</sup> How much do you<br>estimate your<br>liabilities to be?   |  | \$10,000,<br>\$50,000,   | 01-\$10 million<br>001-\$50 million<br>001-\$100 million<br>,001-\$500 million   | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion          |
| Part 7: Sign Below  |  |  |  | -  |
| For you   | correct.  If I have chosen to file under of title 11, United States Counder Chapter 7.  If no attorney represents me out this document, I have obtained in accordance I understand making a false: | Chapter 7, I am aware de. I understand the rel and I did not pay or agotained and read the not with the chapter of titlestatement, concealing pay case can result in fin | that I may proceed, if el<br>ief available under each<br>ree to pay someone wh<br>tice required by 11 U.S.<br>e 11, United States Co<br>property, or obtaining m | de, specified in this petition.  |
|   | /s/ Lafrance Reed-Jackso   | 9-   | /s/ Neva Ree<br>Signature of De  | btor 2   |
| ng 2 Biol 18 a ming la kanada ya kata kata kata kata kata kata kata   | Executed on 12/12/2<br>MM /  | 016<br>DD / YYYY   | Executed on  | 12/12/2016<br>MM / DD / YYYY   |

Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 65 of 70

| Fill in this information to identify your case: |                           |              |                      |  |  |  |  |
|---|---------------------------|--------------|----------------------|--|--|--|--|
| Debtor 1  | Lafrance                  | Reed-Jackson |                      |  |  |  |  |
|   | First Name                | Middle Name  | Last Name            |  |  |  |  |
| Debtor 2  | Neva                      |              | Reed-Jackson         |  |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name  | Last Name            |  |  |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern     | District of Illinois |  |  |  |  |
|   |                           |              | (State)              |  |  |  |  |
| Case number<br>(If known)                       |                           |              |                      |  |  |  |  |

### Official Form 106Dec

Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Part | 1: Sign Below   |   |  |  |  |  |
|------|---|---|--|--|--|--|
|      | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? |   |  |  |  |  |
| E    | <b>N</b> o  |   |  |  |  |  |
|      | Yes. Name of person   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |  |  |  |
|      |   |   |  |  |  |  |
|      |   |   |  |  |  |  |
|      | Under penalty of perjury, I declare that I have read the summary a hat they are true and correct. | and schedules filed with this declaration and   |  |  |  |  |
| i    | /s/ Lafrance Reed-Jackson   | * /s/ Neva Reed-Jackson / Lea / hust  |  |  |  |  |
| S    | ignature of Debtor 1  | Signature of Debtor 2   |  |  |  |  |
| D    | ate 12/12/2016<br>MM/DD/YYYY  | Date 12/12/2016<br>MM/DD/YYYY   |  |  |  |  |

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 66 of 70

| Deb   | tor 1  | Lafrance   |                          | Reed-Jackson                    | Case number (if known)   |  |
|---|--|--|--------------------------|---------------------------------|--|--|
|   |  | First Name   | Middle Name              | Last Name                       |  |  |
| 28.   |  | nin 2 years before y<br>ditors, or other part<br>No<br>Yes. Fill in the deta | ties.                    | did you give a financial statem | ent to anyone about your business? Include all financial institutions,   |  |
|   |  |  |                          | Date issued                     |  |  |
|   |  | Name   |                          | MM/DD/YYYY                      | _  |  |
| •   |  | Number Street  |                          | · ·                             |  |  |
|   |  | Nutriber Street  |                          |                                 |  |  |
|   |  | City   | State Zip Code           | 9                               |  |  |
| Part 12: Sign Below   |  |  |                          |                                 |  |  |
| t   | rue a  | ind correct. I under kruptcy case can research                               | stand that making a fals | se statement, concealing prop   | nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 35/1.  /s/ Neva Reed-Jackson Signature of Debtor 2  Date 12/12/2016 |  |
| Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |  |  |                          |                                 | duals Filing for Bankruptcy (Official Form 107)?   |  |
| [<br>[<br>c   | ✓ No  Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? |  |                          |                                 |  |  |
|   | <b>☑</b> ∾<br>□ ~  | o<br>es. Name of person  |                          |                                 | Attach the Bankruptcy Petition Preparer's Notice,  |  |

# Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 67 of 70

| Debt   | or 1 Lafrance<br>First Name   | Middle Name  | Reed-Jackson<br>Last Name    | Case number (if known)  |   |  |  |  |
|--------|---|--|------------------------------|---|---|--|--|--|
| 16.    | Calculate the median family income that applies to you. Follow these steps:   |  |                              |   |   |  |  |  |
|        | 16a. Fill in the state in wh  | ich you live.  | Illinois                     |   |   |  |  |  |
|        | 16b. Fill in the number of  | people in your household.  | 2                            |   |   |  |  |  |
|        | household   | nily income for your state and size                                  | To find a                    | list of applicable median income amounts, go online also be available at the bankruptcy clerk's office. | \$65,659.00                               |  |  |  |
| 17.    | How do the lines compa  | re?  |                              |   |   |  |  |  |
|        | 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C: § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). |  |                              |   |   |  |  |  |
|        | U.S.C. § 1325(b   |  | Calculation of Disposabl     | pox 2, Disposable income is determined under 11 e Income (Official Form 122C-2). On line 39 of that     |   |  |  |  |
| Part   | Galculate Your Co   | mmitment Period Under  | 11 U.S.C. §1325(b)(4         |   | 97AA000 ********************************* |  |  |  |
| 18.    | Copy your total average   | monthly income from line 11.   |                              |   | \$863.61                                  |  |  |  |
| 19.    |   |  |                              | ot filing with you, and you contend that calculating the spouse's income, copy the amount from line 13. | Trycyre of Avadesia                       |  |  |  |
|        | 19a. If the marital adjustm   | ent does not apply, fill in 0 on li                                  | ne 19a.                      |   | - <u>\$0.00</u>                           |  |  |  |
|        | 19b. Subtract line 19a fr   | om line 18.  |                              |   | \$863.61                                  |  |  |  |
| 20.    | Calculate your current n  | nonthly income for the year. F                                       | ollow these steps:           |   |   |  |  |  |
|        | 20a. Copy line 19b.   |  |                              |   | \$863.61                                  |  |  |  |
|        | Multiply by 12 (the n   | umber of months in a year).  |                              |   | x 12                                      |  |  |  |
|        | 20b. The result is your cur   | rent monthly income for the yea                                      | r for this part of the form. |   | \$10,363.32                               |  |  |  |
|        | 20c. Copy the median fam  | nily income for your state and siz                                   | re of household from line    | 16c.  | \$65,659.00                               |  |  |  |
| 21.    | How do the lines compare?   |  |                              |   |   |  |  |  |
|        | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  |  |                              |   |   |  |  |  |
|        | Line 20b is more than 4, <i>The commitment p</i>  | or equal to line 20c. Unless oth<br>eriod is 5 years. Go to Part 4.  | erwise ordered by the cou    | art, on the top of page 1 of this form, check box   |   |  |  |  |
| Part 4 | Sign Below  |  |                              |   | Table Control                             |  |  |  |
|        | By signing here, I decl   | are under penalty of perjury that                                    | the information on this st   | atement and in any attachments is true and correct.   | 1   |  |  |  |
|        | ✗ /s/ Lafrance Re   | eed-Jackson  | <b>X</b> /s                  | / Neva Reed-Jackson   |   |  |  |  |
|        | Signature of Debto  | or 1   | Sign                         | nature of Debtor 2  | Le F                                      |  |  |  |
|        | Date 12/12/2016<br>MM/DD/YY   | <del></del>  | Date                         | 12/12/2016<br>MM/DD/YYYY  |   |  |  |  |
|        |   | NOT fill out or file Form 122C-<br>l out Form 122C-2 and file it wit |                              | that form, copy your current monthly income from line   | :14                                       |  |  |  |

Case 16-39102 Doc 1 Filed 12/12/16 Entered 12/12/16 15:31:24 Desc Main Document Page 68 of 70

### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re: | Reed-Jackson, Lafrance ; Reed-Jackson, Neva  Debtor(s)  | Case No   |  |  |  |
|--------|---|---|--|--|--|
|        |   | Chapter. Chapter13  |  |  |  |
|        | VERIFICATION (  | OF CREDITOR MATRIX  |  |  |  |
| knowle | The above named Debtors hereby verify that the attedge. | ached list of creditors is true and correct to the best of their .    |  |  |  |
| Date:  | 12/12/2016  | /s/ Reed-Jackson, Lafrance Reed-Jackson, Lafrance Signature of Debtor |  |  |  |
|        |   | /s/ Reed-Jackson, Neva Reed-Jackson, Neva Signature of Joint Debtor   |  |  |  |

CAPITAL ONE AUTO FINAN 3901 DALLAS PKWY PLANO, TX 75093

DEPT OF ED/NAVIENT PO Box 9635 Wilkes Barre , PA 18773

CREDIT ACCEPTANCE PO BOX 513 Southfield , MI 48037

BK OF AMER POB 15026 WILMINGTON , DE 19801

Capital One Bank c/o Denis Henry 1427 Roswell Rd. Marietta, GA 30062

CDA/PONTIAC 415 E MAIN STREATOR , IL 61364

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602

CREDIT MANAGEMENT LP PO Box 118288 Carrollton , TX 75011

Integrity Solutions Services, INC PO Box 1898 Saint Charles , MO 63302

MCSI INC PO BOX 327 PALOS HEIGHTS , IL 60463

MIDLAND FUNDING 2365 Northside Drive San Diego , CA 92108 OSI Collections 7720 E. Belleview Ave B #303 Englewood , CO 80111

portfolio recovery P.O. Box 41067 c/o Nicole Simpson Norfolk, VA 23541

MB Financial 990 N. York Elmhurst , IL 60126

Chase Bank 340 S. Cleveland Bldg 370 OH1-1073 Westerville , OH 43081

South Side Community Federal Credit Union 5401 S Wentworth Ave #25 Chicago , IL 60609